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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

K70211

(3)

TRAYNOR PATHOLOGY ASSOCIATES, P.A.

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| Principal Place of | Business | Mailing Address | | a imalitical del phate Bauch (cont era | |
| 1210 OXBOW WINTER SPRI | LANE NGS FL 32708 | 1210 OXBOW LANE WINTER SPRINGS FI | L 32708 | | |
| | | | Date Incorporated or Qualified 02/24/1989 | 3a. Date of Last Report 04/20/1995 | |
| 2. Principal Place | e of Business | 2a. Mailing Address | | 4. FÉI Number | Applied For |
|] ' | | 26 | | 59-3035523 | Not Applicable |
| Suite, Apt. #, | etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing Trust Fund Contribution | S5.00 May Be Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation has liability for in | |
| i] | 25 | 29 | 30 | Florida Statutes Yes 10. Name and Address of New R | |
| | 9. Name and Address of Curr | ent Registered Agent | B1 Name | 10. Name and Address of New 11 | logistored reguli. |
| | | | 1 1 | | |
| | VITZ, IVAN M. | | 82 Street Add | lress (P.O. Box Number is Not Acceptab | ole) |
| | MILLS AVENUE | | 83 | | |
| ORLAND | OO FL 32803 | | | | Isal a out |
| | | | 84 City | | FL 85 Zip Code |
| Pursuant to or registered familiar with | , and accept the obligations of, Se | 300011 0011100111 | | | |
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| familiar with SIGNATURE | ignature, typed or printed name of rogistered ag OFFICERS A | eent and title if applicable (N AND DIRECTORS | OTE: Registered Agent signature require | ed when reinslating): ADDITIONS/CHANGES TO OFF | |
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SIGNATURE:

PRINTED NAME OF SIGNING OFFICE OF DIRECTOR

96 281-8688