

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000071474

**FILED**  
**Jan 28, 2009**  
**Secretary of State**

**Entity Name:** INTEGRATED PATHOLOGY OUTREACH LABORATORY, PLLC

**Current Principal Place of Business:**

1100 PLANTATION ISLAND DR. S.  
220  
ST. AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

1100 PLANTATION ISLAND DR. S.  
220  
ST. AUGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:** 26-3046648

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARROD, MATTHEW T  
1301 PLANTATION ISLAND DR. SOUTH  
302B  
ST. AUGUSTINE, FL 32080 US

**Name and Address of New Registered Agent:**

PANTALEON, YANET  
1100 PLANTATION ISLAND DRIVE S.  
220  
ST. AUGUSTINE, FL 32080 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: YANET PANTALEON

01/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PANTALEON, YANET  
Address: 1100 PLANTATION ISLAND DR. S. #220  
City-St-Zip: ST. AUGUSTINE, FL 32080

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: YANET PANTALEON

MGRM

01/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date