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FILED
Aug 31, 2001 8:00 am
Secretary of State
05-24-2001 90495 030 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N49428

1. Entity Name

PATHOLOGY ALUMNI FOUNDATION, INC.

Principal Place of Business	Mailing Address
USF DEPT. OF PATHOLOGY 12901 BRUCE B DOWNS BOX 11 TAMPA FL 33612 US	USF DEPT. OF PATHOLOGY 12901 BRUCE B DOWNS. BOX 11 TAMPA FL 33612 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3137945 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BALIS, JOHN U. M 12901 BRUCE B DOWNS BLVD., BOX 11 DEPARTMENT OF PATHOLOGY TAMPA FL 33612	Name: Amyn Rojiani, MD, PhD Street Address (P.O. Box Number is Not Acceptable): 12901 Bruce B. Downs Blvd, Box 11 Department of Pathology City: Tampa FL Zip Code: 33612

8. 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: _____ President 26 July 01
Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ABELL, MURRAY R MD 3601 HUDSON LN TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Curtis Songster, MD 1620 Northshore Dr. NE St. Petersburg, FL 33701	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV SONGSTER, CURTIS M 221 ESTADO WAY NE ST PETERSBURG FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Enid Gilbert-Barness, MD 115 West Virginia Avenue Tampa, FL 33603	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT NAWAB, REHANA M 7229-17TH COURT NE ST PETERSBURG FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BALIS, JOHN M 2627 CLARK RD TAMPA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Amyn Rojiani, MD, PhD 18138 Regents Square Drive Tampa, FL 33647	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Curtis Songster MD 20 Jul 01 727-893-6182
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #