2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2012
Secretary of State

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Entity Name: INTERNATIONAL SOCIETY OF BREAST PATHOLOGY, INC.

Current Principal Place of Business:

655 WEST EIGHTH STREET
JACKSONVILLE, FL 322096511

New Principal Place of Business:

Current Mailing Address:

840 S. WOOD ST MC-847 DEPT PATHOLOGY
C/O ELIZABETH WILEY, TREASURER ISBP
CHICAGO, IL 60612 US

New Mailing Address:

FEI Number: 59-3594371 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZVARA, WILLIAM L
4810 ARAPAHOE AVENUE
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: THOR, ANN D MD
Address: 12631 EAST 17TH AVE, RM L15-2215
City-St-Zip: AURORA, CO 80045 US

Title: S
Name: JACOBS, TIMOTHY MD
Address: 1100 NINTH AVE C6-PTH
City-St-Zip: SEATTLE, WA 9811 US

Title: T
Name: WILEY, ELIZABETH L MD
Address: 512 N. MCCLURG COURT #4004
City-St-Zip: CHICAGO, IL 60611 US

Title: D
Name: PALAZZO, JUAN MD
Address: THOMAS JEFFERSON U 132 S 10TH ST 285M
City-St-Zip: PHILADELPHIA, PA 19107 US

Title: D
Name: BLEIWEISS, IRA J MD
Address: 1 GUSTAVE LEVY PLACE BOX 1194
City-St-Zip: NEW YORK, NY 10029 US

Title: D
Name: ELLIS, IAN MD
Address: NOTTINGHAM CITY HOSPITAL HUCKNALL RD
City-St-Zip: NOTTINGHAM, UK NG5IPB UK

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH L. WILEY, MD T 01/27/2012

Electronic Signature of Signing Officer or Director Date