

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000054085

FILED
May 05, 2011
Secretary of State

Entity Name: NEOGENOMICS LABORATORIES, INC.

Current Principal Place of Business:

12701 COMMONWEALTH DR.
STE. 9
FORT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

12701 COMMONWEALTH DR.
STE. 9
FORT MYERS, FL 33913

New Mailing Address:

FEI Number: 59-3725585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, STEVEN C
1740 PERSIMMON DRIVE
NAPLES, FL 34109 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: D
Name: DENT, MICHAEL
Address: 1845 SENEGAL DATE DRIVE
City-St-Zip: NAPLES, FL 34109

Title: CMO
Name: GASPARINI, ROBERT P
Address: 12701 COMMONWEALTH DRIVE SUITE 9
City-St-Zip: FORT MYERS, FL 33913

Title: CEOD
Name: VANOORT, DOUGLAS
Address: 3275 REGATTA RD
City-St-Zip: NAPLES, FL 34103

Title: SPAO
Name: DVONCH, JEROME J
Address: 11169 LAKELAND CIRCLE
City-St-Zip: FORT MYERS, FL 33913

Title: PFO
Name: JONES, STEVEN C
Address: 1740 PERSIMMON DRIVE
City-St-Zip: NAPLES, FL 34109

Title: CFO
Name: CARDOZA, GEORGE
Address: 12701 COMMONWEALTH DRIVE SUITE 9
City-St-Zip: FORT MYERS, FL 33913

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEROME DVONCH

SPAO

05/05/2011

Electronic Signature of Signing Officer or Director

Date