

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000007170

Entity Name: PATHOLOGY SOLUTIONS, INC.

FILED
Feb 28, 2011
Secretary of State

Current Principal Place of Business:

13575 58TH STREET NORTH
138
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

10191 LAKE GROVE DRIVE
ODESSA, FL 33556

New Mailing Address:

13575 58TH STREET NORTH
SUITE 138
CLEARWATER, FL 33760

FEI Number: 41-2027439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWANDOWSKI, DAYLE
10191 LAKE GROVE DRIVE
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

LEWANDOWSKI, DAYLE
13575 58TH STREET NORTH
SUITE 138
CLEARWATER, FL 33760 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: _____

Electronic Signature of Registered Agent

02/28/2011

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LEWANDOWSKI, MICHAEL
Address: 13575 58TH STREET NORTH
City-St-Zip: CLEARWATER, FL 33760

Title: VP
Name: LEWANDOWSKI, DAYLE
Address: 13575 58TH STREET NORTH
City-St-Zip: CLEARWATER, FL 33760

Title: P
Name: LEWANDOWSKI, MICHAEL
Address: 13575 58TH STREET NORTH, SUITE 138
City-St-Zip: CLEARWATER, FL 33760

Title: P
Name: LEWANDOWSKI, MICHAEL
Address: 13575 58TH STREET NORTH, SUITE 138
City-St-Zip: CLEARWATER, FL 33760

Title: P
Name: LEWANDOWSKI, MICHAEL
Address: 13575 58TH STREET NORTH, SUITE 138
City-St-Zip: CLEARWATER, FL 33760

Title: P
Name: LEWANDOWSKI, MICHAEL
Address: 13575 58TH STREET NORTH, SUITE 138
City-St-Zip: CLEARWATER, FL 33760

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: MICHAEL LEWANDOWSKI

P

02/28/2011

Electronic Signature of Signing Officer or Director

Date