

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000014314

**FILED**  
**Sep 15, 2011**  
**Secretary of State**

**Entity Name:** MONTEREY DIAGNOSTIC LABORATORY, INC.

**Current Principal Place of Business:**

1050 SE MONTEREY ROAD  
SUITE 303  
STUART, FL 34994 US

**New Principal Place of Business:**

**Current Mailing Address:**

4081 SW 47TH AVENUE  
SUITE 1-4  
DAVIE, FL 33314 US

**New Mailing Address:**

**FEI Number:** 11-3677823

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BANNER, JAMES PRES.  
4081 SW 47TH AVENUE  
SUITE 1-4  
DAVIE, FL 33314 US

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

WEAVIL, DAVID C PRES.  
4081 SW 47TH AVENUE  
SUITE 1-4  
DAVIE, FL 33314 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: DAVID C. WEAVIL

09/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WEAVIL, DAVID C  
Address: 1050 MONTEREY RD SUITE 303  
City-St-Zip: STUART, FL 34994

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: DAVID C WEAVIL

PRES

09/15/2011

Electronic Signature of Signing Officer or Director

Date