2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2012
Secretary of State

DOCUMENT# P10000086280

Entity Name: TREASURE COAST PATHOLOGY, P.A.

Current Principal Place of Business:

1128 CATALINA ST.
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

1128 CATALINA ST.
PALM CITY, FL 34990

New Mailing Address:

FEI Number: 27-3750482 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOFTON, STEVEN A MD
1128 CATALINA ST.
PALM CITY, FL 34990 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: PD
Name: MULLEN, S. ALLEN MD
Address: 5557 ANHINGA AVE.
City-St-Zip: PALM CITY, FL 34990

Title: TSD
Name: LOFTON, STEVEN A MD
Address: 1128 CATALINA ST.
City-St-Zip: PALM CITY, FL 34990

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: STEVEN A LOFTON TSD 03/19/2012

Electronic Signature of Signing Officer or Director Date