

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000030982

Entity Name: COASTAL PATHOLOGY, INC.

FILED
Mar 19, 2012
Secretary of State

Current Principal Place of Business:

252 BAY POINT
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

252 BAY POINT
NAPLES, FL 34103

New Mailing Address:

FEI Number: 45-1469958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: GREVEY, SCOTT MD
Address: 252 BAY POINT
City-St-Zip: NAPLES, FL 34103

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: SCOTT C. GREVEY,MD

PRES

03/19/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date