

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 OCT 28 AM 10:22

DOCUMENT # P97000057376 1. Entity Name CENTRAL FLORIDA PATHOLOGY ASSOCIATES, P.A.					
Principal Place of Business 601 E. ROLLINS ST. ORLANDO, FL 32801			Mailing Address 815 HERNDON AVENUE STE 100 ORLANDO, FL 32803		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3468427	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
ELIN V SATORY-DEHOYOS 601 E. ROLLINS ST. ORLANDO, FL 32801				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE 10/28/05					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	TD	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	ELIN V SATORY-DEHOYOS		NAME	Otal, Thomas M.	
STREET ADDRESS	601 E. ROLLINS ST.		STREET ADDRESS	601 E. Rollins St.	
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	Orlando, FL 32803	
TITLE	SD	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	ANDERSON, BRUCE V		NAME	Randell, Robert L.	
STREET ADDRESS	601 E. ROLLINS ST.		STREET ADDRESS	601 E. Rollins St.	
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	Orlando, FL 32803	
TITLE	D	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	GUARDA, LUIS A		NAME	Sullivan, Laura G.	
STREET ADDRESS	601 E. ROLLINS ST.		STREET ADDRESS	601 E. Rollins St.	
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	Orlando, FL 32803	
TITLE	D	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	RADI, MICHAEL J		NAME	Ma, Muchou J.	
STREET ADDRESS	601 E. ROLLINS ST.		STREET ADDRESS	601 E. Rollins St.	
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	Orlando, FL 32803	
TITLE	D	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	PERNICONE, PETER		NAME	Baekey, Paul A.	
STREET ADDRESS	601 E. ROLLINS ST.		STREET ADDRESS	601 E. Rollins St.	
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	Orlando, FL 32803	
TITLE	PD	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	THONI, DEBORAH		NAME	Wheeler, Ross C.	
STREET ADDRESS	601 E. ROLLINS ST.		STREET ADDRESS	601 E. Rollins St.	
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	Orlando, FL 32803	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Elin V. Satory-DeHoyos</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <u>10/26/05</u> Daytime Phone #: <u>407-422-9831</u>		

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CENTRAL FLORIDA PATHOLOGY ASSOCIATES, P.A.

FEI# 59-3468427

ADDITION TO OFFICERS AND DIRECTORS

Title: D (Addition)
Name: Tran, Tien Anh N.
Add: 601 E. Rollins St.
Orlando, FL 32803

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