

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005118

Entity Name: INTERNATIONAL SOCIETY OF BREAST PATHOLOGY, INC.

Current Principal Place of Business:

655 WEST EIGHTH STREET
JACKSONVILLE, FL 32209-6511

Current Mailing Address:

840 S. WOOD ST MC-847 DEPT PATHOLOGY
C/O ELIZABETH WILEY, TREASURER ISBP
CHICAGO, IL 60612 US

FEI Number: 59-3594371

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZVARA, WILLIAM L
4810 ARAPAHOE AVENUE
JACKSONVILLE, FL 32210 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

Date

Officer/Director Detail :

Title PAST PRESIDENT
Name THOR, ANN DMD
Address 12631 EAST 17TH AVE, RM L15-2215
City-State-Zip: AURORA CO 80045

Title PAST PRESIDENT
Name TAN, PUAY-HOON MD
Address SINGAPORE GENERAL HOSPITAL
OUTRAM ROAD
City-State-Zip: SINGAPORE 169608

Title T
Name WILEY, ELIZABETH LMD
Address 512 N. MCCLURG COURT #4004
City-State-Zip: CHICAGO IL 60611

Title PRESIDENT
Name BLEIWEISS, IRA JMD
Address 1 GUSTAVE LEVY PLACE BOX 1194
City-State-Zip: NEW YORK NY 10029

Title SECRETARY
Name FARSHID, GALAREH DR.
Address 1 GOODWOOD ROAD
City-State-Zip: WAYVILLE SOUTH AUSTRALIA 5065

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH L. WILEY, MD

TREASURER

01/21/2016

Electronic Signature of Signing Officer/Director Detail

Date