2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601033

Entity Name: ASSOCIATED PATHOLOGISTS, P.A.

FILED Feb 11, 2019 **Secretary of State** 6316482336CC

Current Principal Place of Business:

3001 W DR MARTIN LUTHER KING JR BLVD

TAMPA, FL 33607

Current Mailing Address:

3001 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33607 US

FEI Number: 59-1263616 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRIEDMAN, MICHAEL I SECRETARY 3001 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33607 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: MICHAEL I. FRIEDMAN 02/11/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

City-State-Zip:

Title VP, TREASURER Title **SECRETARY**

DALENCE, CARLOS R FRIEDMAN, MICHAEL I Name Name

Address 3001 W DR MARTIN LUTHER KING JR Address 3001 W DR MARTIN LUTHER KING JR

BLVD BLVD

TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title **DIRECTOR** Title DIRECTOR

Name JEFFREY, P. BRIAN Name

RUFFOLO, EUGENE F

3001 W DR MARTIN LUTHER KING JR 3001 W DR MARTIN LUTHER KING JR Address Address **BLVD BLVD**

City-State-Zip:

TAMPA FL 33607

Title **PRESIDENT**

Name BASCHINSKY, DMITRY

TAMPA FL 33607

Address 3001 W DR MARTIN LUTHER KING JR

BLVD

City-State-Zip: TAMPA FL 33607

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.

02/11/2019 SIGNATURE: DMITRY BASCHINSKY **PRESIDENT**

Date