

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M64497

Entity Name: NAPLES PATHOLOGY ASSOCIATES, P.A.**Current Principal Place of Business:**1110 PINE RIDGE ROAD,
UNIT 306
NAPLES, FL 34108**Current Mailing Address:**1110 PINE RIDGE ROAD,
UNIT 306
NAPLES, FL 34108 US**FEI Number:** 65-0026153**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAMOS, MITCHEL CPA
999 VANDERBILT BEACH RD
SUITE 707
NAPLES, FL 34108 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:** MITCHEL RAMOS CPA

01/30/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	LARKIN, JEFFREY T
Address	350 7TH ST N
City-State-Zip:	NAPLES FL 34102

Title	TREASURER
Name	KOVACH, CHARLES K
Address	1110 PINE RIDGE ROAD, UNIT 306
City-State-Zip:	NAPLES FL 34108

Title	PRESIDENT
Name	OSTLER, DANIEL A
Address	1110 PINE RIDGE ROAD, UNIT 306
City-State-Zip:	NAPLES FL 34108
Title	VP
Name	BEAULIEU, GREGORY
Address	1110 PINE RIDGE ROAD, UNIT 306
City-State-Zip:	NAPLES FL 34108

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: DANIEL A OSTLER

PRESIDENT

01/30/2023

Electronic Signature of Signing Officer/Director Detail

Date