

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000040731

**Entity Name:** ADVANCED CLINICAL LABORATORIES, INC.

**Current Principal Place of Business:**

3705 S HIGHWAY 27  
SUITE 201  
CLERMONT, FL 34711

**Current Mailing Address:**

3705 S HIGHWAY 27  
SUITE 201  
CLERMONT, FL 34711 US

**FEI Number:** 16-1660256

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WALTERS MCCARTNEY  
174 WEST COMSTOCK AVE  
SUITE 100  
WINTER PARK, FL 32789 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:** CHAD A. WALTERS

04/19/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name PARADIGM HEALTHCARE, LLC  
Address 3705 S HIGHWAY 27  
SUITE 201  
City-State-Zip: CLERMONT FL 34711

*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:** CHAD A. WALTERS

04/19/2021

Electronic Signature of Signing Officer/Director Detail

Date