

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000073360

Entity Name: PATHOLOGY MANAGEMENT CORPORATION**Current Principal Place of Business:**84 W. JERSEY STREET
1
ORLANDO, FL 32806**Current Mailing Address:**84 W. JERSEY STREET
1
ORLANDO, FL 32806 US**FEI Number: 27-0862373****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FRANKLIN, RAYMOND B
84 W. JERSEY STREET
1
ORLANDO, FL 32806 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 P, D
Name FRANKLIN, RAYMOND B
Address 84 W. JERSEY STREET, SUITE 1
City-State-Zip: ORLANDO FL 32806Title D
Name MAGILL, MIKE
Address 84 W. JERSEY STREET
1
City-State-Zip: ORLANDO FL 32806Title D
Name SLOMAN, ANDREW J
Address 84 W. JERSEY STREET, SUITE 1
City-State-Zip: ORLANDO FL 32806Title CFO
Name CHEUNG, WANG MD
Address 84 W. JERSEY STREET
1
City-State-Zip: ORLANDO FL 32806Title S, D
Name LI, SHUAN
Address 84 W. JERSEY STREET, SUITE 1
City-State-Zip: ORLANDO FL 32806Title D
Name GONZALEZ, ORLANDO
Address 84 W. JERSEY STREET, SUITE 1
City-State-Zip: ORLANDO FL 32806Title DIRECTOR
Name HORNSBY, CHRISTOPHER
Address 84 W. JERSEY STREET
1
City-State-Zip: ORLANDO FL 32806

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: WANG CHEUNG, MD PHD.**CFO****02/20/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date