

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000086280

Entity Name: TREASURE COAST PATHOLOGY, P.A.

Current Principal Place of Business:

1128 CATALINA ST.
PALM CITY, FL 34990

Current Mailing Address:

1128 CATALINA ST.
PALM CITY, FL 34990

FEI Number: 27-3750482

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOFTON, STEVEN AMD
1128 CATALINA ST.
PALM CITY, FL 34990 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 PD
Name MULLEN, S. ALLEN MD
Address 5557 ANHINGA AVE.
City-State-Zip: PALM CITY FL 34990

Title TSD
Name LOFTON, STEVEN AMD
Address 1128 CATALINA ST.
City-State-Zip: PALM CITY FL 34990

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: STEVEN A LOFTON

DIRECTOR

04/24/2013

Electronic Signature of Signing Officer/Director Detail

Date