## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000086280

Entity Name: TREASURE COAST PATHOLOGY, P.A.

**Current Principal Place of Business:** 

200 SE HOSPITAL DRIVE STUART, FL 34994

**Current Mailing Address:** 

800 SE MONTEREY COMMONS BLVD SUITE 102

STUART, FL 34996 US

FEI Number: 27-3750482 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SINGH, ANITA MD 800 SE MONTEREY COMMONS BLVD SUITE 102 STUART, FL 34996 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: ANITA SINGH 04/12/2024

Electronic Signature of Registered Agent

Date

FILED Apr 12, 2024

**Secretary of State** 

6540333581CC

Officer/Director Detail:

Title PRESIDENT Title VP

Name SINGH, ANITA DR. Name WHITE, SARAH DR.

Address 800 SE MONTEREY COMMONS BLVD Address 800 SE MONTEREY COMMONS BLVD

SUITE 102 SUITE 102

City-State-Zip: STUART FL 34996 City-State-Zip: STUART FL 34996

Title SECRETARY Title TREASURER

Name REYES-TROCCHIA, ALMA DR. Name BOCKELMAN, BRIAN

Address 800 SE MONTEREY COMMONS BLVD Address 800 SE MONTEREY COMMONS BLVD

SUITE 102 SUITE 102

City-State-Zip: STUART FL 34996 City-State-Zip: STUART FL 34996

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.

Electronic Signature of Signing Officer/Director Detail