

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000156593

**Entity Name:** BIOPATH, LLC

**Current Principal Place of Business:**

12450 COUNTY ROAD 39  
DUETTE, FL 34219

**Current Mailing Address:**

PO BOX 38  
DURANT, FL 33530 US

**FEI Number: 46-1522338**

**Certificate of Status Desired: Yes**

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

REED, ANDREW M ESQ  
1611 HARDEN BLVD  
LAKELAND, FL 33803 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

**Authorized Person(s) Detail :**

Title MGR  
Name GANS, MICHAEL R  
Address 12450 COUNTY ROAD 39  
City-State-Zip: DUETTE FL 34219

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL GANS**

**MANAGING PARTNER**

**04/03/2015**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date