

# FORM 3

**UNITED STATES SECURITIES AND EXCHANGE  
COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL	
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## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934  
or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * <b>ALBITAR MAHER</b>	2. Date of Event Requiring Statement (Month/Day/Year) <b>02/21/2013</b>	3. Issuer Name <b>and</b> Ticker or Trading Symbol <b>NEOGENOMICS INC [NEO]</b>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) <b>Chief Medical Officer</b>	5. If Amendment, Date Original Filed(Month/Day/Year)
(Last) (First) (Middle) <b>12701 COMMONWEALTH DRIVE SUITE 9</b>	(Street) <b>FORT MYERS, FL US 33913</b>	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	
(City) (State) (Zip)	<b>Table I - Non-Derivative Securities Beneficially Owned</b>		

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	34,000	I	Albitar Oncology Defined Benefit Plan owns shares
Common Stock	15,000	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Stock Option (Right to buy)	01/09/2013 <sup>(1)</sup>	01/09/2017	Common Stock	250,000	\$ 1.43	D	
Warrants (Right to Buy)	01/09/2017 <sup>(2)</sup>	01/09/2017	Common Stock	200,000	\$ 1.43	D	

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ALBITAR MAHER 12701 COMMONWEALTH DRIVE SUITE 9 FORT MYERS, FL US 33913			Chief Medical Officer	

# Signatures

/s/ Maher Albitar		11/20/2013
Signature of Reporting Person		Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These stock options were granted upon the start of Mr. Albitar's service to the Company and vest ratably over each of his first four anniversaries with the Company.
- (2) These warrants were issued to Mr. Albitar upon the start of his service to the Company and vest upon the achievement of certain currently unmet milestones.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.