

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002405

Entity Name: GLOBUS MEDICAL, INC.

FILED
Apr 27, 2012
Secretary of State

Current Principal Place of Business:

2560 GENERAL ARMISTEAD AVE
AUDUBON, PA 19403

New Principal Place of Business:

Current Mailing Address:

2560 GENERAL ARMISTEAD AVE
AUDUBON, PA 19403

New Mailing Address:

FEI Number: 04-3744954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP
Name: DEMSKI, DAVID M
Address: 2560 GENERAL ARMISTEAD AVE
City-St-Zip: AUDUBON, PA 19403

Title: CCEO
Name: PAUL, DAVID C
Address: 2560 GENERAL ARMISTEAD AVE
City-St-Zip: AUDUBON, PA 19403

Title: DST
Name: DAVIDAR, DAVID D
Address: 2560 GENERAL ARMISTEAD AVE
City-St-Zip: AUDUBON, PA 19403

Title: D
Name: WHEELER, KURT C
Address: 2560 GENERAL ARMISTEAD AVE
City-St-Zip: AUDUBON, PA 19403

Title: D
Name: LIPTAK, ROBERT W
Address: 2560 GENERAL ARMISTEAD AVE
City-St-Zip: AUDUBON, PA 19403

Title: VP
Name: WILLIAMS, ANTHONY
Address: 2560 GENERAL ARMISTEAD AVE
City-St-Zip: AUDUBON, PA 19403

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: DAVID D. DAVIDAR

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04/27/2012

Electronic Signature of Signing Officer or Director

_____ Date