

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000004910 (4)

1. Corporation Name
ORTHOFIX INC.



Principal Place of Business

**250 E. ARAPAHO RD.
RICHARDSON TX 75081**

Mailing Address

**250 E. ARAPAHO RD.
RICHARDSON TX 75081**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/10/1995	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		75-2608036	
24 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	DELETE		1.1 TITLE	☒ Change ☐ Addition		
NAME	FEDERICO, CHARLES W			1.2 NAME			
STREET ADDRESS	250 EAST ARAPAHO RD			1.3 STREET ADDRESS	10115 KINCEY AVE #250		
CITY-ST-ZIP	RICHARDSON TX			1.4 CITY-ST-ZIP	HUNTERSVILLE, NC 28078		
TITLE	V	DELETE		2.1 TITLE	☒ Change ☐ Addition		
NAME	JOHNSON, STUART B			2.2 NAME	GARY HENLEY		
STREET ADDRESS	250 E. ARAPAHO RD.			2.3 STREET ADDRESS	250 E ARAPAHO AVE		
CITY-ST-ZIP	RICHARDSON TX 75081			2.4 CITY-ST-ZIP	RICHARDSON, TX 75081		
TITLE	V	DELETE		3.1 TITLE	☒ Change ☐ Addition		
NAME	BOWLING, TIMOTHY A			3.2 NAME	JAMES GERO		
STREET ADDRESS	250 E. ARAPAHO RD.			3.3 STREET ADDRESS	10115 KINCEY AVE #250		
CITY-ST-ZIP	RICHARDSON TX 75081			3.4 CITY-ST-ZIP	HUNTERSVILLE, NC 28078		
TITLE	AS	DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME	RUCINSKI, ROBERT A			4.2 NAME			
STREET ADDRESS	250 EAST ARAPAHO RD			4.3 STREET ADDRESS			
CITY-ST-ZIP	RICHARDSON TX			4.4 CITY-ST-ZIP			
TITLE	V	DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME	DODDI, NAMA PHD			5.2 NAME			
STREET ADDRESS	250 E. ARAPAHO RD.			5.3 STREET ADDRESS			
CITY-ST-ZIP	RICHARDSON TX 75081			5.4 CITY-ST-ZIP			
TITLE	V	DELETE		6.1 TITLE	☒ Change ☐ Addition		
NAME	CHIMBEL, LAVONNE M			6.2 NAME	ARTHUR SCHWALM		
STREET ADDRESS	250 E. ARAPAHO RD.			6.3 STREET ADDRESS	10115 KINCEY AVE		
CITY-ST-ZIP	RICHARDSON TX 75081			6.4 CITY-ST-ZIP	HUNTERSVILLE, NC 28078		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)