

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000069517

FILED
Feb 26, 2010
Secretary of State

Entity Name: WEST COAST MOBILE ORTHOPEDICS, INC.

Current Principal Place of Business:

24643 RED ROBIN DR.
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

PMB 194
8951 BONITA BEACH ROAD, #525
BONITA SPRINGS, FL 34135 US

New Mailing Address:

THE UPS STORE, PMB#194
8951 BONITA BEACH ROAD, #525 STE.
BONITA SPRINGS, FL 34135 US

FEI Number: 65-0607079 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RIEGER, CHRISTOPHER L
24643 RED ROBIN DR.
BONITA SPRINGS, FL 34135 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: RIEGER, CHRISTOPHER L
Address: 24643 RED ROBIN DR.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VS
Name: RIEGER, MARIE E
Address: 24643 RED ROBIN DR
City-St-Zip: BONITA SPRINGS, FL 34135

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: CHRISTOPHER L. RIEGER

PRES

02/26/2010

Electronic Signature of Signing Officer or Director

Date