2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 14, 2012
Secretary of State

DOCUMENT# V30000

Entity Name: JACKSONVILLE ORTHOPAEDIC INSTITUTE, INC.

Current Principal Place of Business:

1325 SAN MARCO BLVD.
SUITE 200
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1325 SAN MARCO BLVD.
SUITE 701
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3120987 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHARF, MICHAEL S MD
1325 SAN MARCO BLVD.
SUITE 200
JACKSONVILLE, FL 32207 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: P
Name: LUCIE, R STEPHEN MD
Address: 1325 SAN MARCO BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP
Name: MALLY, EARL B
Address: 3563 PHILLIPS HIGHWAY, STE 101
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: LONGENECKER, STANTON L MD
Address: 1325 SAN MARCO BLVD., STE 701
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: HUTTON, PATRICK M MD
Address: 1325 SAN MARCO BLVD, STE 701
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: KLEINHANS, ROBERT J MD
Address: 1325 SAN MARCO BLVD, STE 701
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: LANCASTER, STEVEN J MD
Address: 1325 SAN MARCO BLVD, STE 701
City-St-Zip: JACKSONVILLE, FL 32207

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: R STEPHEN LUCIE MD P 11/14/2012

Electronic Signature of Signing Officer or Director — Date

V30000

11-14-12

CORP ANNUAL REPORT OFFICERS

**ATTACHMENT

CORP NUMBER: V30000

CONFIRMATION #000241819840

JACKSONVILLE ORTHOPAEDIC INSTITUTE, INC
CORPORATION ANNUAL REPORT
FEI NUMBER 59-3120987
OFFICERS AND DIRECTORS

11	ADDITIONS TO OFFICERS AND DIRECTORS IN 10	
7.1 TITLE	D	X ADDITION
7.2 NAME	KELLER, GREGORY C.	
7.3 STREET ADDRESS	1325 SAN MARCO BLVD	
7.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
8.1 TITLE	D	X ADDITION
8.2 NAME	STEINBERG, MD, BRUCE D.	
8.3 STREET ADDRESS	1325 SAN MARCO BLVD	
8.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
9.1 TITLE	D	X ADDITION
9.2 NAME	CARRASQUILLO, MD, HIRAM A.	
9.3 STREET ADDRESS	1325 SAN MARCO BLVD	
9.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
10.1 TITLE	D	X ADDITION
10.2 NAME	KITAY, GARRY S.	
10.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
10.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
11.1 TITLE	D	X ADDITION
11.2 NAME	CRENSHAW, STEVEN M.	
11.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
11.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
12.1 TITLE	D	X ADDITION
12.2 NAME	WHITAKER, MD, DALE A.	
12.3 STREET ADDRESS	410 JACKSONILLE DRIVE	
12.4 CITY-ST-ZIP	JACKSONVILLE, FL 32250	
13.1 TITLE	D	X ADDITION
13.2 NAME	YOUNG, MD, EDWARD	
13.3 STREET ADDRESS	410 JACKSONILLE DRIVE	
13.4 CITY-ST-ZIP	JACKSONVILLE, FL 32250	
14.1 TITLE	D	X ADDITION
14.2 NAME	VON THRON, M. JOHN	
14.3 STREET ADDRESS	410 JACKSONILLE DRIVE	
14.4 CITY-ST-ZIP	JACKSONVILLE, FL 32250	
15.1 TITLE	D	X ADDITION
15.2 NAME	NORMAN, MD, HAROLD LYNN	
15.3 STREET ADDRESS	2 SHIRCLIFF WAY, #300	
15.4 CITY-ST-ZIP	JACKSONVILLE, FL 32204	
16.1 TITLE	D	X ADDITION
16.2 NAME	GRIMSLEY, RICHARD R.	
16.3 STREET ADDRESS	2 SHIRCLIFF WAY, #300	
16.4 CITY-ST-ZIP	JACKSONVILLE, FL 32204	
17.1 TITLE	D	X ADDITION
17.2 NAME	SAVARESE, ROBERT	
17.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
17.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
18.1 TITLE	D	X ADDITION
18.2 NAME	HARDY, PHILIP R	
18.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
18.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
19.1 TITLE	D	X ADDITION
19.2 NAME	KAMBACH, BRANDON J	
19.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
19.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	

CORP ANNUAL REPORT OFFICERS

**ATTACHMENT

CORP NUMBER: V30000

CONFIRMATION #000241819840

JACKSONVILLE ORTHOPAEDIC INSTITUTE, INC
CORPORATION ANNUAL REPORT
FEI NUMBER 59-3120987
OFFICERS AND DIRECTORS

11	ADDITIONS TO OFFICERS AND DIRECTORS IN 10	
20.1 TITLE	D	X ADDITION
20.2 NAME	PICERNO, RICHARD A	
20.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
20.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
21.1 TITLE	D	X ADDITION
21.2 NAME	STEEL, MAXWELL W	
21.3 STREET ADDRESS	5737 BARNHILL DR, STE 102	
21.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
22.1 TITLE	D	X ADDITION
22.2 NAME	AUGUSTINE, STEPHEN J	
22.3 STREET ADDRESS	2 SHIRCLIFF WAY, #300	
22.4 CITY-ST-ZIP	JACKSONVILLE, FL 32204	
23.1 TITLE	D	X ADDITION
23.2 NAME	DOWARD, DAVID A	
23.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
23.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
24.1 TITLE	D	X ADDITION
24.2 NAME	MANUEL, JENNIFER	
24.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
24.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
25.1 TITLE	D	X ADDITION
25.2 NAME	HASTINGS, TIMOTHY R	
25.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
25.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
26.1 TITLE	D	X ADDITION
26.2 NAME	SCHARF, MICHAEL S	
26.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
26.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
27.1 TITLE	D	X ADDITION
27.2 NAME	BATES, AARON M	
27.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
27.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
28.1 TITLE	D	X ADDITION
28.2 NAME	KAPLAN, KEVIN M	
28.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
28.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
29.1 TITLE	D	X ADDITION
29.2 NAME	TANDRON, CARLOS R	
29.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
29.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
30.1 TITLE	D	X ADDITION
30.2 NAME	PUJADAS, WILLIAM G	
30.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
30.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
31.1 TITLE	D	X ADDITION
31.2 NAME	SOLIS, GREGORY	
31.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
31.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
32.1 TITLE	D	X ADDITION
32.2 NAME	ERO, SUNDAY U	
32.3 STREET ADDRESS	1325 SAN MARCO BLVD, STE 200	
32.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	