

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766176

**Entity Name:** IRISH AMERICAN ORTHOPAEDIC SOCIETY, INC.

**Current Principal Place of Business:**

110 WEST RD  
SUITE 227  
TOWSON, MD 21204

**Current Mailing Address:**

110 WEST RD  
SUITE 227  
TOWSON, MD 21204 US

**FEI Number:** 59-2253980

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GIACHINO, FERNANDO M  
17 MARTIN L. KING JR. BLVD.  
#200  
STUART, FL 34994 US

*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

**Officer/Director Detail :**

Title P  
Name KNIGHT, JOHN M.D.  
Address 407 TRIOMPHE COURT  
City-State-Zip: DANVILLE CA 94506

Title TREASURER  
Name MCDEVITT, EDWARD R DR.  
Address 3116 DROGUE COURT  
City-State-Zip: ANNAPOLIS MD 21403

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DR. EDWARD R. MCDEVITT

**TREASURER**

**04/28/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date