

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K61563

**Entity Name:** MUSCULOSKELETAL INSTITUTE, CHARTERED**Current Principal Place of Business:**13020 N TELECOM PKWY  
TEMPLE TERRACE, FL 33637-0925**Current Mailing Address:**13020 N TELECOM PKWY  
TEMPLE TERRACE, FL 33637-0925 US**FEI Number:** 59-2929608**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CULUMBER, JANENE J  
13020 N. TELECOM PKWY.  
TEMPLE TERRACE, FL 33637-0925 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:** JANENE CULUMBER

03/29/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SANDERS, ROY WERNER DR.  
Address 13020 N TELECOM PKWY  
City-State-Zip: TEMPLE TERRACE FL 33637-0925

Title VP  
Name GASSER, SETH IRA DR.  
Address 13020 N TELECOM PKWY  
City-State-Zip: TEMPLE TERRACE FL 33637-0925

Title TREASURER  
Name SMALL, JOHN MARTIN DR.  
Address 13020 N TELECOM PKWY  
City-State-Zip: TEMPLE TERRACE FL 33637-0925

Title DIRECTOR  
Name STONE, JEFFREY DAVIS DR.  
Address 13020 N TELECOM PKWY  
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Title DIRECTOR  
Name HESS, ALFRED VINCENT DR.  
Address 13020 N TELECOM PKWY  
City-State-Zip: TEMPLE TERRACE FL 33637-0925

Title SECRETARY  
Name INFANTE, ANTHONY FRANK DR.  
Address 13020 N TELECOM PKWY  
City-State-Zip: TEMPLE TERRACE FL 33637-0925

Title DIRECTOR  
Name LYONS, STEVEN THOMAS DR.  
Address 13020 N TELECOM PKWY  
City-State-Zip: TEMPLE TERRACE FL 33637-0925

Title ASSISTANT OFFICER  
Name BAKER, CHRISTOPHER EARL DR.  
Address 13020 N TELECOM PKWY  
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**Continues on page 2**

*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:** ROY SANDERS

PRESIDENT

03/29/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASSISTANT OFFICER  
Name BARNA, STEVEN ANDREW DR.  
Address 13020 N TELECOM PKWY  
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Title ASSISTANT OFFICER  
Name BERNASEK, THOMAS LANE DR.  
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