

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000058308

Entity Name: DENOFF ORTHOPAEDICS, P.A.

Current Principal Place of Business:

1639 N. VOLUSIA AVENUE
SUITE B
ORANGE CITY, FL 32763

Current Mailing Address:

1639 N. VOLUSIA AVENUE
SUITE B
ORANGE CITY, FL 32763 US

FEI Number: 45-5589485

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DENOFF, FRANK L
2325 E. NEW YORK AVENUE
DELAND, FL 32724 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, T	Title	S, D
Name	DENOFF, FRANK L	Name	DENOFF, FRANK L
Address	1639 N. VOLUSIA AVENUE, SUITE B	Address	1639 N. VOLUSIA AVENUE, SUITE B
City-State-Zip:	ORANGE CITY FL 32763	City-State-Zip:	ORANGE CITY FL 32763

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: FRANK DENOFF

PRESIDENT

02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date