

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000027458

**Entity Name:** ADM ORTHOPAEDIC FOOT & ANKLE SPECIALISTS, INC.

**Current Principal Place of Business:**

2526 CANARY ISLES DRIVE  
MELBOURNE, FL 32901

**Current Mailing Address:**

2526 CANARY ISLES DRIVE  
MELBOURNE, FL 32901 US

**FEI Number:** 82-0951426

**Certificate of Status Desired:** No

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

WADE, ALLISON M MD  
2526 CANARY ISLES DRIVE  
MELBOURNE, FL 32901 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 DR  
Name WADE, ALLISON MD  
Address 2526 CANARY ISLES DRIVE  
City-State-Zip: MELBOURNE FL 32901

*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:** ALLISON WADE

DR

06/13/2019

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

\_\_\_\_\_  
Date