

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000051717

Entity Name: ORTHOPAEDIC CENTER OF VERO BEACH, P.A.

Current Principal Place of Business:

1285 36TH STREET
SUITE 100
VERO BEACH, FL 32960

Current Mailing Address:

1285 36TH STREET
SUITE 100
VERO BEACH, FL 32960 US

FEI Number: 65-0925136

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, MICHELLE
1285 36TH STREET
SUITE 100
VERO BEACH, FL 32960 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: MICHELLE SMITH

02/06/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PCEO
Name STEINFELD, RICHARD MD
Address 1285 36TH STREET STE 100
City-State-Zip: VERO BEACH FL 32960

Title VP
Name DILELLA, DO, CARL
Address 1285 36TH STREET
SUITE 100
City-State-Zip: VERO BEACH FL 32960

Title VP
Name RIVERA, MD, MIGUEL
Address 1285 36TH STREET
SUITE 100
City-State-Zip: VERO BEACH FL 32960

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: RICHARD STEINFELD, MD

PRESIDENT

02/06/2020

Electronic Signature of Signing Officer/Director Detail

Date