

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000005421

**FILED  
Jan 10, 2018  
Secretary of State  
CC1476247548**

**Entity Name:** GLOBUS MEDICAL NORTH AMERICA, INC.

**Current Principal Place of Business:**

2560 GENERAL ARMISTEAD AVENUE  
AUDUBON, PA 19403

**Current Mailing Address:**

2560 GENERAL ARMISTEAD AVENUE  
AUDUBON, PA 19403

**FEI Number: 47-5520556**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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           DIRECTOR, PRESIDENT  
Name           WILLIAMS, ANTHONY  
Address        2560 GENERAL ARMISTEAD AVENUE  
City-State-Zip: AUDUBON PA 19403

Title           DIRECTOR, VICE PRESIDENT  
Name           SCAVILLA, DANIEL THOMAS  
Address        2560 GENERAL ARMISTEAD AVENUE  
City-State-Zip: AUDUBON PA 19403

Title           DIRECTOR, SECRETARY,  
                  TREASURER  
Name           MILLER, ROB  
Address        2560 GENERAL ARMISTEAD AVENUE  
City-State-Zip: AUDUBON PA 19403

*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: ROB MILLER**

**SECRETARY**

**01/10/2018**

Electronic Signature of Signing Officer/Director Detail

Date