
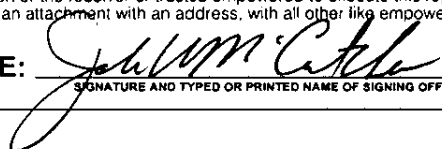


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90372 039 ***158.75

DOCUMENT # 602623 1. Entity Name THE JEWETT ORTHOPAEDIC CLINIC, P.A.					
Principal Place of Business 1285 ORANGE AVE WINTER PARK, FL 32789			Mailing Address 1285 ORANGE AVE WINTER PARK, FL 32789		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State Zip Country			City & State Zip Country		
4. FEI Number 59-1308619				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCCUTCHEN, M. D. J 1285 ORANGE AVE WINTER PARK, FL 32789			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PAPA, M. D. J 1285 ORANGE AVENUE WINTER PARK, FL 32789 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Papa, John A., M.D. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCCUTCHEN, JOHN W. 1285 ORANGE AVENUE WINTER PARK, FL <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD McCutchen, John W., M.D. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Munson, Gregory O., M.D. 1285 Orange Avenue Winter Park, Florida 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Chase, John R., M.D. 1285 Orange Avenue Winter Park, Florida 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Shure, Richard L., M.D. 1285 Orange Avenue Winter Park, Florida 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Morris, Hugh B., M.D. 1285 Orange Avenue Winter Park, Florida 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  John W. McCutchen, MD 4-2-08 (407) 647-2287 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

40085886



02262008 Chg-P CR2E034 (12/06)

ATTACHMENT

40085886

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #602623

THE JEWETT ORTHOPAEDIC CLINIC, P.A.

Additional Officers and Directors:

VD

Konsens, Richard M., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Deren, Jeffrey A., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Tall, Reginald L., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Mintzer, Craig M., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Barnard, Brian K., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Krumins, Kenneth A., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Robison, Janet M., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Beckner, Mark A., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Fenichel, Adam S., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Jablonski, Michael V., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Billings, Joseph B., D.O.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Choung, Steven C., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Macksoud, Wadih S., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Gasner, Kurt A., M.D.
1285 Orange Avenue
Winter Park, Florida 32789

VD

Brown, Mary Lynn, M.D.
1285 Orange Avenue
Winter Park, Florida 32789