
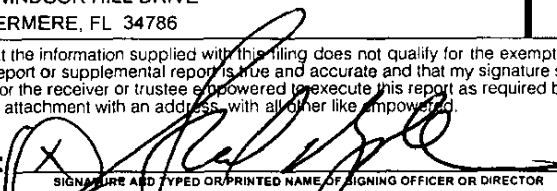


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90101 043 ***150.00

DOCUMENT # 604675		
1. Entity Name ORLANDO ORTHOPAEDIC CENTER, M.D., P.A.		
Principal Place of Business 100 W. GORE ST. SUITE 500 ORLANDO, FL 32806	Mailing Address 100 W. GORE ST. FIFTH FLOOR LUCERNE MEDICAL PLAZA ORLANDO, FL 32806	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent GOLL, STEPHEN R 711 PINETREE RD WINTER PARK, FL 32789		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ROSEN, JEFFREY P 1684 INDIAN DANCE COURT MAITLAND, FL 32751	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T JONES, CRAIG P 1345 SPRING LAKE DRIVE ORLANDO, FL 32804	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HALPERIN, LAWRENCE S 408 SPRING VALLEY LANE ALTAMONTE SPRINGS, FL 32714	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1AS BLICK, SAMUEL S 8707 SOUTHERN BREEZE DR ORLANDO, FL 32836	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1AT MCBRIDE, G. GRADY 204 QUAYSIDE CIRLCE #104 MAITLAND, FL 32751	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	2AS FUNK, JOSEPH D 2704 WINDSOR HILL DRIVE WINDERMERE, FL 34786	
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: 		Date <u>3/21/07</u> Daytime Phone # <u>407-254-2528</u>

40047608



02062007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1486941

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

ATTACHMENT

40047608

#604675

**LIST OF OFFICERS FOR UNIFORM BUSINESS REPORT, ANNUAL REPORT,
AND FICTITIOUS NAME RENEWAL**

PRESIDENT (P)
GOLL, STEPHEN R.
711 PINETREE ROAD
WINTER PARK, FL 32789

VICE PRESIDENT (VP)
HALPERIN, LAWRENCE S.
408 SPRING VALLEY LANE
ALTAMONTE SPRINGS, FL 32714

SECRETARY (S)
ROSEN, JEFFREY P.
1684 INDIAN DANCE COURT
MAITLAND, FL 32751

TREASURER (T)
JONES, CRAIG P.
1345 SPRING LAKE DRIVE
ORLANDO, FL 32804

1ST ASST SECRETARY (1AT)
BLICK, SAMUEL S.
8707 SOUTHERN BREEZE DRIVE
ORLANDO, FL 32836

1ST ASST TREASURER (1AT)
MCBRIDE, G. GRADY
204 QUAYSIDE CIRCLE #104
MAITLAND, FL 32751

2ND ASST SECRETARY (2AS)
FUNK, JOSEPH D.
2704 WINDSOR HILL DRIVE
WINDERMERE, FL 34786

2ND ASST TREASURER (2AT)
TOPOLESKI, TAMARA A.
6184 RALEIGH STREET #122
ORLANDO, FL 32835

ATTACHMENT

40047608

3RD ASST SECRETARY (3AS)
CHRISTENSEN, ALAN W.
1011 LINCOLN CIRCLE
WINTER PARK, FL 32789

#604625

3RD ASST TREASURER (3AT)
WEBER, STEVEN E.
2544 ROBERT TRENT JONES DRIVE
#817
ORLANDO, FL 32835

4TH ASST SECRETARY (4AS)
WIERNIK, DANIEL L.
14513 RIVIERA POINTE DRIVE
ORLANDO, FL 32828

4TH ASST TREASURER (4AT)
SCHWARTZBERG, RANDY
111 ARROWHEAD COURT
WINTER SPRINGS, FL 32708