

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604675

FILED
Apr 23, 2009
Secretary of State

Entity Name: ORLANDO ORTHOPAEDIC CENTER, M.D., P.A.

Current Principal Place of Business:

100 W. GORE ST.
SUITE 500
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

100 W. GORE ST. FIFTH FLOOR
LUCERNE MEDICAL PLAZA
ORLANDO, FL 32806

New Mailing Address:

100 W. GORE ST.
SUITE 500
ORLANDO, FL 32806

FEI Number: 59-1486941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLL, STEPHEN R
711 PINETREE RD
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: ROSEN, JEFFREY P
Address: 1684 INDIAN DANCE COURT
City-St-Zip: MAITLAND, FL 32751

Title: T () Delete
Name: JONES, CRAIG P
Address: 1345 SPRING LAKE DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: VP () Delete
Name: HALPERIN, LAWRENCE S
Address: 408 SPRING VALLEY LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: 1AS () Delete
Name: BLICK, SAMUEL S
Address: 8707 SOUTHERN BREEZE DR
City-St-Zip: ORLANDO, FL 32836

Title: 1AT () Delete
Name: MCBRIDE, G. GRADY
Address: 204 QUAYSIDE CIRCLE #104
City-St-Zip: MAITLAND, FL 32751

Title: 2AS () Delete
Name: FUNK, JOSEPH D
Address: 2704 WINDSOR HILL DRIVE
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SCHWARTZBERG, RANDY S
Address: 111 ARROWHEAD COURT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: 1AS (X) Change () Addition
Name: REUSS, BRYAN L
Address: 150 EAST ROBINSON STREET APT 1601
City-St-Zip: ORLANDO, FL 32822

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 2AS (X) Change () Addition
Name: BLICK, SAMUEL S
Address: 8707 SOUTHERN BREEZE DRIVE
City-St-Zip: ORLANDO, FL 32836

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STEPHEN R GOLL, M.D.

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date