

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000889

FILED
Feb 27, 2007
Secretary of State

Entity Name: DEPUY SPINE, INC.

Current Principal Place of Business:

325 PARAMOUNT DRIVE
RAYNHAM, MA 02767

New Principal Place of Business:

Current Mailing Address:

325 PARAMOUNT DRIVE
ATTN: CORPORATE COUNSEL
RAYNHAM, MA 02767

New Mailing Address:

FEI Number: 34-1393238 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D () Delete
Name: DORMER, MICHAEL
Address: ONE JOHNSON & JOHNSON PLAZA
City-St-Zip: NEW BRUNSWICK, NJ 08933

Title: D () Delete
Name: FISCHETTI, GARY P
Address: 325 PARAMOUNT DRIVE
City-St-Zip: RAYNHAM, MA 02767

Title: D () Delete
Name: BIEDERMANN, LUTZ
Address: BIEDERMANN MOTECH GMBH
City-St-Zip: BERTHA-VON-SUTTNER-STRASSE, GE 23 GE

Title: D () Delete
Name: OBERHAUSEN, THOMAS
Address: 700 ORTHOPAEDIC DRIVE
City-St-Zip: WARSAW, IN 46581

Title: D () Delete
Name: SIEMERS, STEPHAN HEINRI
Address: OTTO-LILIENTHAL-STRASSE 16 A
City-St-Zip: BREMAN, GE 28199 GE

Title: SECR () Delete
Name: GREGORY, MALOBLOCKI
Address: 325 PARAMOUNT DRIVE
City-St-Zip: RAYNHAM, MA 02767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VALERIANI, NICHOLAS
Address: ONE JOHNSON & JOHNSON PLAZA
City-St-Zip: NEW BRUNSWICK, NJ 08933

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GREGORY MALOBLOCKI

SECR

02/27/2007

Electronic Signature of Signing Officer or Director

_____ Date