

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004074

FILED
Apr 29, 2011
Secretary of State

Entity Name: SPINEOLOGY INC.

Current Principal Place of Business:

7800 THIRD STREET N
SUITE 600
ST. PAUL, MN 55128 US

New Principal Place of Business:

Current Mailing Address:

7800 THIRD STREET N
SUITE 600
ST. PAUL, MN 55128 US

New Mailing Address:

FEI Number: 41-2020890 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

OFFICERS AND DIRECTORS:

Title: PSD
Name: BOOTH, JOHN J
Address: 7 RED PINE ROAD
City-St-Zip: NORTH OAKS, MN 55127

Title: D
Name: KING, THOMAS R
Address: 200 SOUTH SIXTH STREET #4000
City-St-Zip: MINNEAPOLIS, MN 554021425

Title: D
Name: RYBICKI, JAMES T
Address: 2855 EAST NEWMAN'S LANE
City-St-Zip: SALT LAKE CITY, UT 84121

Title: D
Name: BRATTAIN, DONALD R
Address: 15600 WAYZATA BLVD., #101
City-St-Zip: WAYZATA, MN 55391

Title: D
Name: SPENCER, ED JR
Address: 901 MARQUETTE AVENUE, SUITE 2820
City-St-Zip: MINNEAPOLIS, MN 55402

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: JOHN BOOTH

_____ Electronic Signature of Signing Officer or Director

PSD

04/29/2011

_____ Date