

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **F93000001405**  
1. Corporation Name  
**Biomet, Inc.**

Principal Place of Business      Mailing Address  
**Airport Industrial Park same**  
**P.O. Box 587**  
**Warsaw, IN 46581-0587**

3. Date Incorporated or Qualified <b>3/22/93</b>	3a. Date of Last Report <b>5/1996</b>
4. FEI Number <b>35-1418342</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

9. Name and Address of Current Registered Agent  
**CT Corporation System**  
**1200 S. Pine Island Rd.**  
**Plantation, FL 33324**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	<b>President/Director</b> <input type="checkbox"/> DELETE
NAME	<b>Dane A. Miller, Ph.D.</b>
STREET ADDRESS	<b>Airport Industrial Park</b>
CITY, ST, ZIP	<b>Warsaw, IN 46580</b>
TITLE	<b>Vice President/Director</b> <input type="checkbox"/> DELETE
NAME	<b>Charles E. Niemier</b>
STREET ADDRESS	<b>Airport Industrial Park</b>
CITY, ST, ZIP	<b>Warsaw, IN 46580</b>
TITLE	<b>Vice President/Treasurer</b> <input type="checkbox"/> DELETE
NAME	<b>Gregory D. Hartman</b>
STREET ADDRESS	<b>Airport Industrial Park</b>
CITY, ST, ZIP	<b>Warsaw, IN 46580</b>
TITLE	<b>Vice President</b> <input type="checkbox"/> DELETE
NAME	<b>Garry L. England</b>
STREET ADDRESS	<b>Airport Industrial Park</b>
CITY, ST, ZIP	<b>Warsaw, IN 46580</b>
TITLE	<b>Vice Pres/Dir/Secretary</b> <input type="checkbox"/> DELETE
NAME	<b>Daniel P. Hann</b>
STREET ADDRESS	<b>Airport Industrial Park</b>
CITY, ST, ZIP	<b>Warsaw, IN 46580</b>
TITLE	<b>Vice President</b> <input type="checkbox"/> DELETE
NAME	<b>Joel P. Pratt</b>
STREET ADDRESS	<b>Airport Industrial Park</b>
CITY, ST, ZIP	<b>Warsaw, IN 46580</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>(See attached "Exhibit A" for additional officers and directors)</b>
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	
2.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	
3.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	
4.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	
5.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	
6.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	
<b>800002137398</b> <b>-04/09/97--01028--011</b> <b>***165.00</b>	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information contained on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **3/17/97** (219) 267-6639  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

pg. 2 of 3

## **"EXHIBIT A"**

### **BIOMET, INC.**

Controller

**James W. Haller**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Chairman of the Board, Director

**Niles L. Noblitt**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Senior Vice President - Director

**Jerry L. Ferguson**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Director

**M. Ray Harroff**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Director

**Thomas F. Kearns, Jr.**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Director

**Jerry L. Miller**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Director

**Kenneth V. Miller**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Director

**L. Gene Tanner**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Director

pg 3 of 3

**Marilyn Tucker Quayle**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581

Director

**C. Scott Harrison**  
Airport Industrial Park  
P.O. Box 587  
Warsaw, Indiana 46581