2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001405

Entity Name: BIOMET, INC.

FILED Mar 19, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: AIRPORT INDUSTRIAL PARK PO BOX 587 WARSAW, IN 465810587 **Current Mailing Address: New Mailing Address:** PO BOX 587 WARSAW, IN 465810587 US FEI Number: 35-1418342 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PD () Delete Title: () Change () Addition MILLER, DANE A Name: Name: 16 STONE CAMP Address: Address: City-St-Zip: WINONA LAKE, IN 46590 City-St-Zip: Title: VD Title: () Delete () Change () Addition Name: NIEMIER, CHARLES E Name: 1600 S. MEADOW DR. Address: Address: WARSAW, IN 46580 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition FERGUSON, JERRY L Name: Name: 3860 FOREST GLEN AVE. Address: Address: City-St-Zip: WARSAW, IN 46580 City-St-Zip: Title: () Delete Title: () Change () Addition HARRISON, C. SCOTT MD Name: Name: Address: 1400 BRANDTON RD. Address: City-St-Zip: MECHANICSBURG, PA 17055 City-St-Zip: Title: VDS Title: () Delete () Change () Addition HANN, DANIEL P Name: Name: 1814 W. HOBART COURT Address: Address: City-St-Zip: WARSAW, IN 46580 City-St-Zip: Title: () Delete Title: () Change () Addition KEARNS, THOMAS F Name: Name: 27 DEEP WOOD RD. Address: Address: City-St-Zip: City-St-Zip: DARIEN, CT 06820

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

	Flataria Circatora of Circatora Officer - Discreta		D-4-
SIGNATURE:	DANIEL P. HANN	VDS	03/19/2004

L. GENE TANNER 251 N. ILLINOIS SUITE 500 INDIANAPOLIS, IN 46204-1927

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