## 2001 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F9800000196

HOUSTON TX 77046-0391

SIGNATURE:

1. Entity Name

SULZER SPINE-TECH SURGICAL INC.

Principal Place	of Business	Mailing Address						
3 EAST GREENWAY PLAZA INNEAPOLIS MN 55439 SUITE 1600 HOUSTON TX 77046-0391					80049172			
2. Principal Pla	ace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS	SPACE		
City & State		City & State		4. FI	4. FEI Number 41-1890308 Applied Not App		olied For Applicable	
Zip	Country	Zip	Country	<b>5.</b> C	ertificate of Status Desired	\$8.75 Addi	tional	
	6. Name and Address of Current	Registered Agent		7. N	ame and Address of New Registered	<u>.</u>		
		<u> </u>	Name			-		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			Street A	Street Address (P.O. Box Number is Not Acceptable)				
PLAN	IATION FE 33324		City			Zip Code	}	
	named entity submits this statement fo	The purpose of ondinging i	io rogiotoroa omeo e	rogional da ag				
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (No	OTE. Registered Agent signat	ure required when re	instating) DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!!  After MAY 1, 2001  Make Check Payable				550.00	Election Campaign Financing     Trust Fund Contribution.		<b>0</b> May Be to Fees	
11.	OFFICERS AND		12.		I DITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	3 IN 11	
TITLE	D	☐ Delete	TITLE			Change	Addition	
NAME	BUCHEL, ANDRE P		NAME					
STREET ADDRESS CITY-ST-ZIP	3 EAST GREENWAY PLAZA, SUI HOUSTON TX 77046-0391	TE 1600	STREET ADDRESS CITY-ST-ZIP					
TITLE	T	☐ Delete	TITLE			Change	Addition	
NAME	MAY, RICHARD J		NAME					
STREET ADDRESS	3 EAST GREENWAY PLAZA, SUI	ITE 1600	STREET ADDRESS CITY-ST-ZIP					
CITY-ST-ZIP	HOUSTON TX 77046-0391			<u> </u>		Change	Addition	
TITLE	P   Lunsford, Paul R	☐ Delete	TIFLE NAME			Unange	Addition	
NAME STREET ADDRESS	7375 BUSH LAKE RD.		STREET ADDRESS					
CITY-ST-ZIP	MINNEAPOLIS MN 55439-2027		CITY-ST-Z <b>i</b> P					
TITLE	S	☐ Delete	TITLE			☐ Change	Addition	
NAME	WISE, DAVID S		NAME			•		
STREET ADDRESS	3 EAST GREENWAY PLAZA, SU	ITE 1600	STREET ADDRESS					
CITY - \$T - ZIP	HOUSTON TX 77046-0391	•	CITY-ST-ZIP					
TITLE	V	☐ Delete	TITLE			☐ Change	Addition	
NAME	THALHUBER, DENNIS J		NAME					
STREET ADDRESS	7375 BUSH LAKE RD.		STREET ADDRESS					
CITY-ST-ZIP	MINNEAPOLIS MN 55439-2027		CITY-\$T-ZIP					
TITLE	V	<b>X</b> Delete	TITLE	Assista	nt Secretary	Change	<b>X</b> Addition	
NAME	SELMAN, T.C. II		NAME	James E	I. Johnson			
STREET ADDRESS		JITE 1600	STREET ADDRESS	3 East	Greenway Plaza, Suit	te 1600		

CITY-ST-ZIP

13. I 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 indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

David S. Wise, Secretary

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Houston, TX 77046-0391

4/17/01

713-561-6373

Daytime Phone #

FILED

May 11, 2001 8:00 am Secretary of State

05-11-2001 90032 030 \*\*\*150.00