

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001604

Entity Name: ORTHOPARTNERS, INC.

FILED
Mar 19, 2012
Secretary of State

Current Principal Place of Business:

2301 MAITLAND CENTER PKWY
SUITE 140
ORLANDO, FL 32751

New Principal Place of Business:

Current Mailing Address:

PO BOX 607129
ORLANDO, FL 32860

New Mailing Address:

FEI Number: 33-0846785

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: DCEO
Name: KERR, DAVID C
Address: 8761 THE ESPLANADE PENTHOUSE 31
City-St-Zip: ORLANDO, FL 32836

Title: CFO
Name: ARELLANO, GEORGE A
Address: 6333 N. ORANGE BLOSSOM TRAIL SUITE 220
City-St-Zip: ORLANDO, FL 32810

Title: DV
Name: SCHWENN, SHANNON R
Address: 6333 N. ORANGE BLOSSOM TRAIL SUITE 220
City-St-Zip: ORLANDO, FL 32810

Title: S
Name: KERR, MARY ANN
Address: 8761 THE ESPLANADE PENTHOUSE 31
City-St-Zip: ORLANDO, FL 32836

Title: V
Name: GUSTAVSON, WILLIAM P
Address: 2301 MAITLAND CENTER PKWY SUITE 140
City-St-Zip: MAITLAND, FL 32751

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: GEORGE A. ARELLANO

CFO

03/19/2012

Electronic Signature of Signing Officer or Director

Date