

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000092525

Entity Name: APOGEE SPINE, LLC

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

809 NAPOLI LANE  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DAVID A. HOLMES  
99 NESBIT STREET  
PUNTA GORDA, FL 33950

**New Mailing Address:**

FEI Number: 26-1092930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOLMES, DAVID A  
FARR, FARR, EMERICH, HACKETT & CARR PA  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TRAINOR, MICHAEL J  
Address: 809 NAPOLI LANE  
City-St-Zip: PUNTA GORDA, FL 33950

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL J. TRAINOR

MGR

03/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date