2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2010
Secretary of State

DOCUMENT# L08000064285

Entity Name: MICROSPINE ORTHOPEDIC PHYSICIANS, LLC

Current Principal Place of Business:

101 MICROSPINE WAY
DEFUNIAK SPRINGS, FL 32435

New Principal Place of Business:

Current Mailing Address:

101 MICROSPINE WAY
DEFUNIAK SPRINGS, FL 32435

New Mailing Address:

FEI Number: 26-2969544 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BARBER, ANGEL
101 MICROSPINE WAY
DEFUNIAK SPRINGS, FL 32435 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: MGRM
Name: MICROSPINE, INC.
Address: 101 MICROSPINE WAY
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

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 Statues.

SIGNATURE: MICROSPINE INC MGRM 03/29/2010

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