2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# L38943

Entity Name: RYDER ORTHOPAEDICS, INC.

Current Principal Place of Business:

1500 ROYAL PALM SQUARE BLVD
SUITE 104
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

1500 ROYAL PALM SQUARE BLVD
SUITE 104
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0165394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OWEN, PATRICIA A
635 S.E. 34 STREET
CAPE CORAL, FL 33904 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	RYDER, LAURA E	
Address:	635 SE 34 ST	
City-St-Zip:	CAPE CORAL, FL 33904	
Title:	TS	( ) Delete
Name:	OWEN, PATRICIA A	
Address:	635 S.E. 34 STREET	
City-St-Zip:	CAPE CORAL, FL 33904	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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.

SIGNATURE: PATRICIA A OWEN TS 01/27/2005

Electronic Signature of Signing Officer or Director Date