2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078696

Entity Name: HATCH ORTHOPEDICS, P.A.

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

578 STERTHAUS AVENUE ORMOND BEACH, FL 32174

Current Mailing Address: New Mailing Address:

578 STERTHAUS AVENUE 578 STERTHAUS DRIVE ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174

FEI Number: 59-3668826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HATCH, ROBERT S M.D.

1405 N HALIFAX AVE
DAYTONA BEACH, FL 32118 US

HATCH, ROBERT S M.D.

578 STERTHAUS DRIVE
ORMOND BEACH, FL 32174 US

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: ROBERT S HATCH, MD 01/03/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR () Delete Title: DR (X) Change () Addition

Name:HATCH, ROBERT S M.D.Name:HATCH, ROBERT S M.D.Address:1405 N HALIFAX AVEAddress:578 STERTHAUS DRIVECity-St-Zip:DAYTONA BEACH, FL 32118City-St-Zip:ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBERT S HATCH DR 01/03/2007