

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081984

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: EAST COAST ORTHOPAEDICS, P.A.

## Current Principal Place of Business:

1201 EAST SAMPLE ROAD  
POMPANO BEACH, FL 33064

## New Principal Place of Business:

## Current Mailing Address:

1201 EAST SAMPLE ROAD  
POMPANO BEACH, FL 33064

## New Mailing Address:

FEI Number: 65-1039722

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARCOMBE, VALERIE G  
PHILLIPS POINT, EAST TOWER  
777 SOUTH FLAGLER DRIVE, SUITE 900  
WEST PALM BEACH, FL 33401 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: D ( ) Delete  
Name: NAIDE, STEVEN E M.D.  
Address: 1201 EAST SAMPLE ROAD  
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete  
Name: JANKE, BRUCE E M.D.  
Address: 1201 EAST SAMPLE ROAD  
City-St-Zip: POMPANO BEACH, FL 33064

## 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 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: BRUCE E. JANKE, MD

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date