

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046107

FILED  
May 13, 2006  
Secretary of State

**Entity Name:** HIGHLAND CENTER FOR ORTHOPAEDICS & UPPER EXTREMITY SURGERY, P.A.

**Current Principal Place of Business:**

3009 COUNTY ROAD  
540A  
LAKELAND, FL 33813 US

**New Principal Place of Business:**

3317 HIGHWAY 98S  
SUITE 9  
LAKELAND, FL 33803 US

**Current Mailing Address:**

2161 COUNTY ROAD 540A  
#286  
LAKELAND, FL 33813 US

**New Mailing Address:**

**FEI Number:** 02-0593810      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JURBALA, BRIAN M M.D.  
3009 COUNTY ROAD  
540-A  
LAKELAND, FL 33813 US

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

JURBALA, BRIAN M M.D.  
2161 COUNTY ROAD 540A  
#286  
LAKELAND, FL 33813 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: \_\_\_\_\_

Electronic Signature of Registered Agent

05/13/2006

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JURBALA, BRIAN M MD  
Address: 3009 COUNTY ROAD 540-A  
City-St-Zip: LAKELAND, FL 33813

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JURBALA, BRIAN M MD  
Address: 2161 COUNTY RD 540A, #286  
City-St-Zip: LAKELAND, FL 33813

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: BRIAN M. JURBALA

P

05/13/2006

Electronic Signature of Signing Officer or Director

Date