

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000001947

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** RICH BURTNER ORTHOPEDICS, INC.

**Current Principal Place of Business:**

2745 FIRST ST  
1905  
FT. MYERS, FL 33916

**New Principal Place of Business:**

3040 OASIS GRAND BLVD  
2406  
FT. MYERS, FL 33916

**Current Mailing Address:**

2745 FIRST ST  
1905  
FT. MYERS, FL 33916

**New Mailing Address:**

3040 OASIS GRAND BLVD  
2406  
FT. MYERS, FL 33916

**FEI Number:** 27-1625723

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURTNER, RICHARD E  
2745 FIRST ST  
1905  
FT. MYERS, FL 33916 US

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

BURTNER, RICHARD E  
3040 OASIS GRAND BLVD  
2406  
FT. MYERS, FL 33916 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: RICHARD BURTNER

01/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: BURTNER, RICHARD E  
Address: 3040 OASIS GRAND BLVD #2406  
City-St-Zip: FT. MYERS, FL 33916

I hereby 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 all other like empowered.

SIGNATURE: RICHARD BURTNER

P/D

01/19/2012

Electronic Signature of Signing Officer or Director

Date