

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23929

Entity Name: ORTHOMERICA PRODUCTS, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

505 31ST STREET
NEWPORT BEACH, CA 92659

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 607129
ORLANDO, FL 328607129

New Mailing Address:

FEI Number: 33-0343239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEOD () Delete
Name: KERR, DAVID C.,
Address: 223 VIA QUITO
City-St-Zip: NEWPORT, CA

Title: S () Delete
Name: KERR, MARY ANN,
Address: 223 VIA QUITO
City-St-Zip: NEWPORT, CA

Title: CFO () Delete
Name: ARELLANO, GEORGE
Address: 12004 LAKESHORE DR
City-St-Zip: CLERMONT, FL 34711

Title: VD () Delete
Name: SCHWENN, SHANNON R.,
Address: 2051 ENTERPRISE OSTEEN RD
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GEORGE ARELLANO

CFO

03/24/2009

Electronic Signature of Signing Officer or Director

Date