

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35194

Entity Name: ARTHREX, INC.

FILED
Jan 05, 2012
Secretary of State

Current Principal Place of Business:

1370 CREEKSIDE BLVD
NAPLES, FL 34108 US

New Principal Place of Business:

Current Mailing Address:

1370 CREEKSIDE BLVD
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 06-1121728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMIEDING, REINHOLD
1370 CREEKSIDE BLVD
NAPLES, FL 34108 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

OFFICERS AND DIRECTORS:

Title: T
Name: SPARROW, KATHLEEN D
Address: 1370 CREEKSIDE BLVD
City-St-Zip: NAPLES, FL 34108

Title: PD
Name: SCHMIEDING, REINHOLD
Address: 1370 CREEKSIDE BLVD
City-St-Zip: NAPLES, FL 34108

Title: VD
Name: PRICE, R. SCOTT
Address: 1370 CREEKSIDE BLVD
City-St-Zip: NAPLES, FL 34108 US

Title: S
Name: SCHMIEDING, JOHN W
Address: 1370 CREEKSIDE BLVD
City-St-Zip: NAPLES, FL 34108

Title: VD
Name: CHEEK, JON W
Address: 1370 CREEKSIDE BLVD
City-St-Zip: NAPLES, FL 34108 US

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: REINHOLD SCHMIEDING

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01/05/2012

Electronic Signature of Signing Officer or Director

_____ Date