## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000072548

Entity Name: PALM BEACH ORTHOPEDIC TRAUMA, INC.

FILED Jan 06, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

733 US 1 733 US HWY 1

NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

733 US 1 733 US HWY ONE

NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408

FEI Number: 65-0443848 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LICHTBLAU AND GOLDENBERG, P.A. 3300 PGA BLVD. SUITE 700 PALM BEACH GARDENS, FL 33410 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 Date

## **OFFICERS AND DIRECTORS:**

Title: DIR

Name: WEINER, RICHARD L M.D.
Address: 733 U.S. HIGHWAY ONE
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: DIR

Name: SASLOW, STEVEN R D.O.
Address: 733 US HIGHWAY ONE
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: DIR

Name: SCHNEIDER, ANDREW I M.D.

Address: 733 US HWY ONE

City-St-Zip: NORTH PALM BEACH, FL 33408

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 L. WEINER, M.D. DIR 01/06/2011