2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000032716

Apr 18, 2012 Secretary of State

Entity Name: CENTER FOR BONE & JOINT SURGERY OF THE PALM BEACHES, P.A.

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

10131 W FOREST HILL BLVD 10131 FOREST HILL BLVD

STE 230 STE 230

WELLINGTON, FL 334146109 US WELLINGTON, FL 334146109 US

Current Mailing Address: New Mailing Address:

10131 FOREST HILL BLVD 10131 W FOREST HILL BLVD STE 230

STE 230

WELLINGTON, FL 334146109 US WELLINGTON, FL 334146109 US

FEI Number: 65-0491293 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:

DAVIS, RICHARD T ESQ 901 N. OLIVE AVE

WEST PALM BEACH, FL 33401 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:

MONTIJO, HARVEY MD Name:

10131 FOREST HILL BLVD., SUITE 230 Address:

City-St-Zip: WELLINGTON, FL 334146109

Title: VΡ

Name: YEE, GARVIN MD

10131 FOREST HILL BLVD SUITE 230 Address: WELLINGTON, FL 334146109 City-St-Zip:

Title:

WAELTZ, MARK A MD Name:

10131 FOREST HILL BLVD STE 230 Address: City-St-Zip: WELLINGTON, FL 334146109

Title:

ACEVEDO, JORGE I MD Name:

Address: 10131 FOREST HILL BLVD STE 230 City-St-Zip: WELLINGTON, FL 334146109

Title:

Name: SIMPSON, DAVID R MD

10131 FOREST HILL BLVD STE 230 Address:

City-St-Zip: WELLINGTON, FL 33414

Title:

Name: DESSER, DANA R MD

10131 FOREST HILL BLVD STE 230 Address: City-St-Zip: WELLINGTON, FL 334146109

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: HARVEY MONTIJO Ρ 04/18/2012 Harvey Montijo, M.D. Garvin Yee, M.D. Mark Waeltz, M.D. Veronica Pedro, M.D. Jose Ortega, M.D.



Jorge Acevedo, M.D.
Robert Lins, M.D.
Robert Rochman, M.D.
Nicholas Sama, M.D.
David R. Simpson, M.D.
Dana R. Desser, D.O.

Center for None and Joint Surgery of the Palm Beaches, P.A 10131 Forest Hill Blvd. Suite 230
Wellington FL, 33414-6109
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Please make the following additions to the Annual Report:

- Ortega, Jose R, MD 10131 Forest Hill Blvd, Suite 230 Wellington, FL 33414-6109 Title-D
- Lins, Robert E, MD 10131 Forest Hill Blvd, Suite 230 Wellington, FL 33414-6109 Title-D
- Rochman, Robert A, MD
 10131 Forest Hill Blvd, Suite 230
 Wellington, FL 33414-6109
 Title-D

- 4. Sama, Nicholas, MD 10131 Forest Hill Blvd. Suite 230 Wellington, FL 33414 Title -D
- Simpson, David, MD 10131 Forest Hill Blvd, Suite 230 Wellington, FL 33414-6109 Title-D
- 6. Desser, Dana, MD 10131 Forest Hill Blvd, Suite 230 Wellington, FL 33414-6109 Title-D

Thank you,

Joseph Sama Assistant Controller

Center for Bone and Joint Surgery

561-803-8698 Office

561-615-1954 Fax