

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000020418

FILED
Apr 02, 2004
Secretary of State

Entity Name: ORTHOPEDIC DESIGNS, INC.

Current Principal Place of Business:

WEST BAY CORPORATE CENTER II
9521 INTERNATIONAL COURT NORTH
ST. PETERSBURG, FL 33716

New Principal Place of Business:

Current Mailing Address:

WEST BAY CORPORATE CENTER II
9521 INTERNATIONAL COURT NORTH
ST. PETERSBURG, FL 33716

New Mailing Address:

FEI Number: 59-3303910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESQUIVEL, JULIO C ESQ.
SHUMAKER, LOOP & KENDRICK, LLP
101 E. KENNEDY BLVD., SUITE 2800
TAMPA, FL 33602 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: CD () Delete
Name: BRAMLET, DALE G
Address: 2044 BRIGHTWATERS BLVD., N.E.
City-St-Zip: ST. PETERSBURG, FL

Title: CEO () Delete
Name: FROST, JACK M
Address: 6965 1ST AVE. N.
City-St-Zip: ST PETERSBURG, FL 33710

Title: P () Delete
Name: SCHABER, JOHN H
Address: 6965 1ST AVE. N.
City-St-Zip: ST PETERSBURG, FL 33710

Title: S () Delete
Name: MANELL, PAT
Address: 4600 4TH ST N
City-St-Zip: ST PETERSBURG, FL 33703

Title: D () Delete
Name: HAMMILL, JOHN
Address: 1517 COINING DR
City-St-Zip: TOLEDO, OH 43612

Title: CFO () Delete
Name: WEEKS, BARBARA B
Address: 6965 1ST AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: FROST, JACK M
Address: 6965 1ST AVE. N.
City-St-Zip: ST PETERSBURG, FL 33710

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

Title: D (X) Change () Addition
Name: LEY-BROWN, JACQUELINE
Address: 1 BEACH DRIVE
City-St-Zip: ST PETERSBURG, FL 33701

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

Title: CFOS (X) Change () Addition
Name: WEEKS, BARBARA B
Address: 6965 1ST AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BARBARA B. WEEKS

CFO

04/02/2004

Electronic Signature of Signing Officer or Director

Date

RICHARD SCHULTS
184 COUNTRY LANE
RINGGOLD, GA 30736

RONALD PADINSKE DIRECTOR
114 DOUGLAS ROAD EAST
OLDSMAR, FL 34677