

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000057459

FILED
Jan 16, 2008
Secretary of State

Entity Name: CUSTOM ORTHOPEDIC, INC.

Current Principal Place of Business:

5277 N TAMIAMI TRL
SARASOTA, FL 34234

New Principal Place of Business:

1271 TALLEVAST RD.
SARASOTA, FL 34243

Current Mailing Address:

5277 N TAMIAMI TRL
SARASOTA, FL 34234

New Mailing Address:

1271 TALLEVAST RD.
SARASOTA, FL 34243

FEI Number: 65-0763953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEASE, CHERYL R
5277 NORTH TAMIAMI TRAIL
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

DEASE, CHERYL R
1271 TALLEVAST RD.
SARASOTA, FL 34243 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:

01/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DEASE, CHERYL R
Address: 5277 N TAMIAMI TRAIL 103
City-St-Zip: SARASOTA, FL 34234

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: DEASE, CHERYL R
Address: 1271 TALLEVAST RD
City-St-Zip: SARASOTA, FL 34243

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: CHERYL R. DEASE

PRES

01/16/2008

Electronic Signature of Signing Officer or Director

Date