

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000045630

FILED
Mar 16, 2011
Secretary of State

Entity Name: ORTHOPAEDIC ASSOCIATES OF SOUTH BROWARD, P.A.

Current Principal Place of Business:

1150 NORTH 35TH AVENUE SUITE 390
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

1150 NORTH 35TH AVENUE SUITE 390
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 65-0839076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EISINGER, DENNIS J
4000 HOLLYWOOD BLVD #265-S
HOLLYWOOD, FL 33021 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: DVS
Name: GROSSMAN, WARREN
Address: 1150 NORTH 35TH AVENUE SUITE 390
City-St-Zip: HOLLYWOOD, FL 33021

Title: DPT
Name: STRAIN, RICHARD
Address: 1150 NORTH 35TH AVENUE SUITE 390
City-St-Zip: HOLLYWOOD, FL 33021

Title: D
Name: STEINLAUF, STEVEN
Address: 1150 NORTH 35TH AVENUE STE 390
City-St-Zip: HOLLYWOOD, FL 33021

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: WARREN GROSSMAN, M.D.

DVS

03/16/2011

Electronic Signature of Signing Officer or Director

Date