

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000052084

Entity Name: APPLIED ORTHOPAEDIC RESEARCH INC

Current Principal Place of Business:

19 MAHOE DRIVE NORTH
PALM COAST, FL 32137

Current Mailing Address:

P.O. BOX 353819
PALM COAST, FL 32135

FEI Number: 46-2997165

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEISS, CHARLES
19 MAHOE DRIVE NORTH
PALM COAST, FL 32137 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

Officer/Director Detail :

Title P
Name WEISS, CHARLES
Address PO BOX 353819
City-State-Zip: PALM COAST FL 32135

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: CHARLES WEISS

P

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date