2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000032716

Entity Name: CENTER FOR BONE & JOINT SURGERY OF THE PALM

BEACHES, P.A.

Current Principal Place of Business:

10131 FOREST HILL BLVD STE 230 WELLINGTON, FL 33414-6109

Current Mailing Address:

10131 FOREST HILL BLVD STE 230 WELLINGTON, FL 33414-6109 US

FEI Number: 65-0491293 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CAMERON, GLENN SESQ 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

FILED Nov 06, 2017

Secretary of State

CC4747889182

Officer/Director Detail:

Title PRESIDENT Title VP

Name MONTIJO, HARVEY MD Name YEE, GARVIN MD

Address 10131 FOREST HILL BLVD. STE 230 Address 10131 FOREST HILL BLVD STE 230

City-State-Zip: WELLINGTON FL 33414-6109 City-State-Zip: WELLINGTON FL 33414-6109

Title SECRETARY Title CHAIRMAN

Name WAELTZ, MARK A MD Name SIMPSON, DAVID R MD

Address 10131 FOREST HILL BLVD STE 230 Address 10131 FOREST HILL BLVD STE 230

City-State-Zip: WELLINGTON FL 33414-6109 City-State-Zip: WELLINGTON FL 33414

Title CHAIRMAN Title CHAIRMAN

NamePEDRO-ALEXANDER, VERONICA MDNameORTEGA-GARCIA, JOSE R MDAddress10131 FOREST HILL BLVD. STE 230Address10131 FOREST HILL BLVD. STE 230

City-State-Zip: WELLINGTON FL 33414-6109 City-State-Zip: WELLINGTON FL 33414-6109

Title CHAIRMAN Title CHAIRMAN

Name LINS, ROBERT E MD Name ROCHMAN, ROBERT A MD

Address 10131 FOREST HILL BLVD. STE 230 Address 10131 FOREST HILL BLVD. STE 230

City-State-Zip: WELLINGTON FL 33414-6109 City-State-Zip: WELLINGTON FL 33414-6109

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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 PRESIDENT 11/06/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title CHAIRMAN

Name SAMA, NICHOLAS MD

Address 10131 FOREST HILL BLVD. STE 230

City-State-Zip: WELLINGTON FL 33414-6109

Title CHAIRMAN

Name STARMAN, JAMES S MD

Address 10131 FOREST HILL BLVD STE 230

City-State-Zip: WELLINGTON FL 33414-6109

Title CHAIRMAN
Name HART, GAVIN

Address 10131 FOREST HILL BLVD STE 230

City-State-Zip: WELLINGTON FL 33414-6109

Title CHAIRMAN

Name PANCHAL, ANAND P DO

Address 10131 FOREST HILL BLVD STE 230

City-State-Zip: WELLINGTON FL 33414-6109

Title CHAIRMAN

Name MONTIJO, HARVEY ENRIQUE

Address 10131 FOREST HILL BLVD STE 230

City-State-Zip: WELLINGTON FL 33414-6109