2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2025
Secretary of State
1117460657CC

DOCUMENT# P95000088967

Entity Name: ORTHOPAEDIC SURGERY ASSOCIATES, INC.

Current Principal Place of Business:

2623 SOUTH SEACREST BLVD, SUITE 216
BOYNTON BEACH, FL 33435

Current Mailing Address:

2623 SOUTH SEACREST BLVD, SUITE 216
BOYNTON BEACH, FL 33435 US

FEI Number: 65-0640914

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAUM, CHRISTOPHER Q
2623 SOUTH SEACREST BLVD.
SUITE 216
BOYNTON BEACH, FL 33435 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	PRESIDENT	Title	COMPTROLLER
Name	SHAPIRO, ERIC T	Name	LUSKIN, BRANDON M.D.
Address	2623 S SEACREST BLVD SUITE 216	Address	2623 S SEACREST BLVD SUITE 216
City-State-Zip:	BOYNTON BEACH FL 33435	City-State-Zip:	BOYNTON BEACH FL 33435
Title	CEO	Title	SECRETARY
Name	NAUM, CHRISTOPHER Q	Name	GRANDIC, ELVIS L
Address	2623 S SEACREST BLVD SUITE 216	Address	2623 SOUTH SEACREST BLVD. SUITE 216
City-State-Zip:	BOYNTON BEACH FL 33435	City-State-Zip:	BOYNTON BEACH FL 33435
Title	VP		
Name	COURTNEY, JONATHAN B		
Address	2623 SOUTH SEACREST BLVD. SUITE 216		
City-State-Zip:	BOYNTON BEACH FL 33435		

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: ERIC T SHAPIRO PRESIDENT 03/13/2025

Electronic Signature of Signing Officer/Director Detail — Date