

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001025

FILED
Jan 30, 2013
Secretary of State
CC1385841628

Entity Name: HENDRICKS ORTHOTIC PROSTHETIC ENTERPRISES, INC.

Current Principal Place of Business:

2241 S. WATSON ROAD
SUITE 101
ARLINGTON, TX 76010

Current Mailing Address:

5204 TENNYSON PARKWAY
SUITE 100
PLANO, TX 75051 US

FEI Number: 59-3485670

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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
Name HENLEY, GARY
Address 2601 PINEWOOD DRIVE
City-State-Zip: GRAND PRAIRIE TX 75051

Title VP
Name RADTKE, JOEL
Address 5796 ARMADA DRIVE
City-State-Zip: SUITE 250 CA 92008

Title SECR
Name PETERSON, T. COLE
Address 5204 TENNYSON PARKWAY, SUITE
 100
City-State-Zip: PLANO TX 75024

Title ASST. TREASURER
Name MONTOYA, SERGIO
Address 2601 PINEWOOD DRIVE
City-State-Zip: GRAND PAIRIE TX 75051

Title TREASURER
Name MONTOYA, SERGIO
Address 2601 PINEWOOD DRIVE
City-State-Zip: GRAND PRAIRIE TX 75051

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: T. COLE PETERSON

SECRETARY

01/30/2013

Electronic Signature of Signing Officer/Director Detail

Date