

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000001374

**Entity Name:** FLORIDA CENTER FOR ORTHOPAEDICS, INC.

**Current Principal Place of Business:**

6200 METROWEST BOULEVARD  
SUITE 104-105  
ORLANDO, FL 32835

**Current Mailing Address:**

6200 METROWEST BOULEVARD  
SUITE 104-105  
ORLANDO, FL 32835 US

**FEI Number:** 59-3550798

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DEAN MEAD SERVICES, LLC  
420 S. ORANGE AVENUE  
SUITE 700  
ORLANDO, FL 32801 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:** RICHARD SMITH

01/22/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name SMITH, RICHARD C DR.  
Address 6200 METROWEST BOULEVARD  
SUITE 104-105  
City-State-Zip: ORLANDO FL 32835

*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:** RICHARD C. SMITH

PD

01/22/2023

Electronic Signature of Signing Officer/Director Detail

Date