## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000093364

Entity Name: ORTHOPEDIC SPECIALISTS, P.A.

**Current Principal Place of Business:** 

7225 N UNIVERSITY DRIVE SUITE 202 TAMARAC, FL 33321

**Current Mailing Address:** 

7225 N UNIVERSITY DRIVE SUITE 202 TAMARAC, FL 33321 US

FEI Number: 65-0957701 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BORKSON, ELLIOT PESQ 1313 S. ANDREWS AVENUE FT. LAUDERDALE, FL 33316 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 Jan 13, 2014

**Secretary of State** 

CC9927521405

Officer/Director Detail:

Title P Title \

Name TROIANO, CHRISTOPHER JMD Name GERARD, FREDRIC MMD

Address 3021 LAKE SHORE DRIVE Address 11331 SW 1ST CT

City-State-Zip: DEERFIELD BEACH FL 33442 City-State-Zip: PLANTATION ACRES FL 33325

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.