

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000024341

**Entity Name:** JOINT REPLACEMENT INSTITUTE, LLC.

**Current Principal Place of Business:**

3466 PINE RIDGE RD  
SUITE A  
NAPLES, FL 34109

**Current Mailing Address:**

3466 PINE RIDGE RD  
SUITE A  
NAPLES, FL 34109 US

**FEI Number:** 26-2135549

**Certificate of Status Desired:** No

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

BIGGS, HENRY KCEO  
3466 PINE RIDGE RD  
SUITE A  
NAPLES, FL 34109 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

**Authorized Person(s) Detail :**

Title CEO  
Name BIGGS, HENRY KCEO  
Address 1250 PINE RIDGE RD. SUITE #203  
City-State-Zip: NAPLES FL 34108

Title MNGR  
Name MARCHIONNI, MARY JO OMNGR  
Address 1250 PINE RIDGE RD SUITE #203  
City-State-Zip: NAPLES FL 34108

Title VP  
Name WALLACE, BRIAN ROBERT  
Address 1250 PINE RIDGE RD  
SUITE #203  
City-State-Zip: NAPLES FL 34108

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** HENRY K BIGGS

CEO

06/13/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date