

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000000114

Entity Name: CHECKPOINT SURGICAL, INC.

Current Principal Place of Business:

22901 MILLCREEK BLVD
SUITE 360
CLEVELAND, OH 44122

Current Mailing Address:

22901 MILLCREEK BLVD
SUITE 360
CLEVELAND, OH 44122 US

FEI Number: 47-5405672

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN STREET
SUITE 4
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 DIRECTOR
Name MARSHBANKS, TRACY
Address ONE S. WACKER DRIVE, STE 3900
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR
Name CHUISANO, MICHAEL
Address 3520 BYRON DRIVE
City-State-Zip: DOYLESTOWN PA 18902

Title DIRECTOR
Name WALLACE, WAYNE
Address 1290 BASSETT RD., #7
City-State-Zip: WESTLAKE OH 44145

Title DIRECTOR
Name RACKLEY, RAYMOND MD
Address 3199 FALMOUTH RD
City-State-Zip: SHAKER HEIGHTS OH 44122

Title CHAIRMAN OF THE BOARD
Name THROPE, GEOFFREY B.
Address 22901 MILLCREEK BLVD., SUITE 110
City-State-Zip: CLEVELAND OH 44122

Title DIRECTOR
Name MCNABB, CARTER
Address 221 EAST 4TH STREET, STE 2400
City-State-Zip: CINCINNATI OH 45202

Title SECRETARY
Name HUBBARD, DONALD B.
Address 6050 OAK TREE BLVD, SUITE 360
City-State-Zip: INDEPENDENCE OH 44131

Title VICE PRESIDENT SALES
Name DIBLASI, RICHARD
Address 6050 OAK TREE BLVD, SUITE 360
City-State-Zip: INDEPENDENCE OH 44131

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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: LAURA KECK

TREASURER & CFO

04/20/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT, CEO & ASST. SECRETARY
Name COSENTINO, LEONARD M.
Address 6050 OAK TREE BLVD, SUITE 360
City-State-Zip: INDEPENDENCE OH 44131

Title TREASURER & CFO
Name KECK, LAURA
Address 6050 OAK TREE BLVD, SUITE 360
City-State-Zip: INDEPENDENCE OH 44131

Title VICE PRESIDENT OPERATIONS AND
 R&D
Name LEWIS, DEREK
Address 6050 OAK TREE BLVD, SUITE 360
City-State-Zip: INDEPENDENCE OH 44131

Title VP CLINICAL SERVICES
Name SCANLAN, KEVIN
Address 6050 OAK TREE BLVD, SUITE 360
City-State-Zip: INDEPENDENCE OH 44131