

2018 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F09000004015

FILED
Oct 05, 2018
Secretary of State
CR1213864206

Entity Name: ORTHOPEDIATRICS CORP.

Current Principal Place of Business:

2850 FRONTIER DRIVE
WARSAW, IN 46582

Current Mailing Address:

2850 FRONTIER DRIVE
WARSAW, IN 46582 US

FEI Number: 26-1761833

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CHRISTINE KELM

10/05/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT, CEO
Name THRODAHL, MARK C
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title VP
Name ODLE, GREGORY A.
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title VP
Name BAILEY, DAVID R.
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title SECRETARY, GENERAL COUNSEL
Name GERRITZEN, DANIEL J.
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR, CHAIRMAN
Name SCHLOTTERBACK, TERRY
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR
Name PELIZZON, DAVID
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR
Name INFANTE, MARIE
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR
Name BERRY, BERNIE B. III
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

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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: MARK C. THRODAHL

PRESIDENT

10/05/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, TREASURER, CFO
Name HITE, FRED
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR
Name UNGER, KEVIN
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR
Name RICCITELLIV, SAM
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title CHIEF MEDICAL OFFICER
Name ARMSTRONG, PETER
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title VP, TRAUMA & DEFORMITY CORRECTION
BUSINESS
Name HAUSER, JOE
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR
Name HUGHES, BRYAN
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR
Name BURNS, STEPHEN
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title DIRECTOR
Name RUF, HARALD
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582

Title SENIOR VICE PRESIDENT
Name PRITCHARD, MIKE
Address 2850 FRONTIER DRIVE
City-State-Zip: WARSAW IN 46582