

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000003348

Entity Name: INCISIVE SURGICAL, INC.

FILED  
Jul 12, 2011  
Secretary of State

**Current Principal Place of Business:**

14405 21ST AVE N., SUITE 130  
PLYMOUTH, MN 55447

**New Principal Place of Business:**

**Current Mailing Address:**

14405 21ST AVE N., SUITE 130  
PLYMOUTH, MN 55447

**New Mailing Address:**

FEI Number: 41-1950621

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JENSEN, RYAN  
19119 SECOND COURT NW  
TAMPA, FL 33548 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SHANNON, JOHN L  
Address: 14405 21ST AVE N., SUITE 130  
City-St-Zip: PLYMOUTH, MN 55447

Title: VP  
Name: MCCLURG, RONALD W  
Address: 14405 21ST AVE N., SUITE 130  
City-St-Zip: PLYMOUTH, MN 55447

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: RONALD W. MCCLURG

CFO

07/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date