

1.) CORPORATION NAME:

**ARTHREX, INC.**

DUE DATE: **12/31/2011**

SCC ID NO: **F1406281**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CT CORPORATION SYSTEM**

**4701 COX RD STE 301**

**GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMV	200,000
COMNV	1,800,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1370 CREEKSIDE BLVD

CITY/ST/ZIP: NAPLES, FL 34108-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: REINHOLD SCHMIEDING  
TITLE: PRESIDENT  
ADDRESS: 1370 CREEKSIDE BLVD  
CITY/ST/ZIP/CO: NAPLES, FL 34108-

OFFICER

DIRECTOR

NAME: JON W CHEEK  
TITLE: VICE PRESIDENT  
ADDRESS: 1370 CREEKSIDE BLVD  
CITY/ST/ZIP/CO: NAPLES, FL 34108-

OFFICER

DIRECTOR

NAME: R SCOTT PRICE  
TITLE: VICE PRESIDENT  
ADDRESS: 1370 CREEKSIDE BLVD  
CITY/ST/ZIP/CO: NAPLES, FL 34108-

OFFICER

DIRECTOR

NAME: JOHN W SCHMIEDING  
TITLE: SECRETARY  
ADDRESS: 1370 CREEKSIDE BLVD  
CITY/ST/ZIP/CO: NAPLES, FL 34108-

OFFICER

DIRECTOR

NAME: KATHLEEN SPARROW  
TITLE: TREASURER  
ADDRESS: 1370 CREEKSIDE BLVD  
CITY/ST/ZIP/CO: NAPLES, FL 34108-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ REINHOLD SCHMIEDING  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

REINHOLD SCHMIEDING,  
PRESIDENT  
PRINTED NAME AND CORPORATE  
TITLE

11/4/2011  
DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.