

1.) CORPORATION NAME:

**Globus Medical, Inc.**

DUE DATE: **6/30/2011**

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

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

**RICHMOND, VA 23219**

SCC ID NO: **F1754664**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	659,178,636
PREFER	50,691,245

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2560 GENERAL ARMISTEAD AVE

CITY/ST/ZIP: AUDUBON, PA 19403-

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DAVID M DEMSKI	
TITLE:	PRES/COO/DIR	
ADDRESS:	2560 GENERAL ARMISTEAD AVE	
CITY/ST/ZIP/CO:	AUDUBON, PA 19403-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DAVID C PAUL	
TITLE:	CHRMN/CEO	
ADDRESS:	2560 GENERAL ARMISTEAD AVENUE	
CITY/ST/ZIP/CO:	AUDUBON, PA 19403-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ROBERT W LIPTAK	
TITLE:	DIRECTOR	
ADDRESS:	ONE MEMORIAL DR STE 1230	
CITY/ST/ZIP/CO:	CAMBRIDGE, MA 02142-	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	KURT C WHEELER	
TITLE:	DIRECTOR	
ADDRESS:	2560 GENERAL ARMISTEAD AVENUE	
CITY/ST/ZIP/CO:	AUDUBON, PA 19403-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DAVID D DAVIDAR	
TITLE:	SEC/TREA/DIR	
ADDRESS:	2560 GENERAL ARMISTEAD AVE	
CITY/ST/ZIP/CO:	AUDUBON, GA 19403-	

NAME:	ANTHONY WILLIAMS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2560 GENERAL ARMISTEAD AVE		
CITY/ST/ZIP/CO:	AUDUBON, PA 19403-		

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.

<u>/s/ DAVID M DEMSKI</u>	<u>DAVID M DEMSKI, PRES/COO/DIR</u>	<u>6/16/2011</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.