2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065387

Entity Name: BOLDUC PHYSICAL THERAPY, INC.

FILED Apr 02, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2741 NE 48 SOURT 3301 W. BONYTON BEACH BLVD LIGHTHOUSE, FL 33064 SUITE 2

BOYNTON BEACH, FL 33436

Current Mailing Address: New Mailing Address:

2741 NE 48 SOURT 3301 W. BOYNTON BEACH BLVD SUITE 2

BOYNTON BEACH, FL 33436

FEI Number: 65-1022058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOLDUC, VICTORIA
2741 NE 48 COURT
LIGHTHOUSE POINT, FL 33064
BOLDUC, VICTORIA
3301 W. BOYNTON BEACH BLVD
BOYNTON BEACH, FL 33436

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: 04/02/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: PSD (X) Change () Addition

Name: BOLDUC, VICTORIA Name: BOLDUC, VICTORIA

 Address:
 2741 NE 48 COURT
 Address:
 3301 W. BOYNTON BEACH BLVD

 City-St-Zip:
 LIGHTHOUSE POINT, FL 33064
 City-St-Zip:
 BOYNTON BEACH, FL 33436

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VICTORIA BOLDUC PRES 04/02/2004

Electronic Signature of Signing Officer or Director

Date