## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000011581

Entity Name: NYS REHABILITATIVE MASSAGE, INC.

FILED Apr 29, 2004 Secretary of State

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

1809 EDGEWATER DR 1809 EDGEWATER DRIVE ORLANDO, FL 32804 0RLANDO, FL 32804

Current Mailing Address: New Mailing Address:

1809 EDGEWATER DR 712 SEMINOLE AVENUE ORLANDO, FL 32804 ORLANDO, FL 32804

FEI Number: 56-2314912 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BUGARIN-DURLRY, AVA
1809 EDGEWATER DR
ORLANDO, FL 32804 US
BUGARIN-DURLEY, AVA
1809 EDGEWATER DR
ORLANDO, FL 32804 US
ORLANDO, FL 32804 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: M. AVA BUGARIN-DURLEY 04/29/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP () Delete

Name: BUGARIN-DURLEY, MAUREEN A

Address: 10028 MARGUEX DR City-St-Zip: ORLANDO, FL 32825

 Title:
 V
 ( ) Delete

 Name:
 BUGARIN, JUDY M

 Address:
 10028 MARGUEX DR

 City-St-Zip:
 ORLANDO, FL 32825

Title: S (X) Delete
Name: DURLEY, CHRISTOPHER S

Address: 10028 MARGUEX DR
City-St-Zip: ORLANDO, FL 32825

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition Name: BUGARIN-DURLEY, MAUREEN A

Address: 712 SEMINOLE AVE City-St-Zip: ORLANDO, FL 32804

Title: VP (X) Change ( ) Addition Name: DURLEY, CHRISTOPHER S

Address: 712 SEMINOLE AVE City-St-Zip: ORLANDO, FL 32804

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

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: M. AVA BUGARIN-DURLEY DP 04/29/2004