2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028915

Entity Name: TAMPA BAY THERAPY, INC.

FILED Apr 11, 2009 Secretary of State

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

6237 DUCK KEY COURT 14439 MIRABELLE VISTA CIR.

TAMPA, FL 33625 TAMPA, FL 33626

Current Mailing Address: New Mailing Address:

6237 DUCK KEY COURT 14439 MIRABELLE VISTA CIR.

TAMPA, FL 33625 TAMPA, FL 33626

FEI Number: 65-1173915 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:

WATKINS, CARL T CPA 5103 MEMORIAL HWY TAMPA, FL 33634

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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

DODD, JASMINE C DODD, JASMINE C Name: Name: 6237 DUCK KEY COURT Address: 14439 MIRABELLE VISTA CIR. Address:

City-St-Zip: TAMPA, FL 33625 City-St-Zip: TAMPA, FL 33626

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JASMINE C. DODD OWNE 04/11/2009

Electronic Signature of Signing Officer or Director

Date