

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000040959

**Entity Name:** LAKE WORTH PHYSICAL MEDICINE INC

**Current Principal Place of Business:**

1722 A SOUTH CONGRESS AVENUE  
PALM SPRINGS, FL 33461

**Current Mailing Address:**

P.O. BOX 16836  
WEST PALM BEACH, FL 33416

**FEI Number:** 45-5200597

**Certificate of Status Desired:** No

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

GRAND, RYAN  
1722 A SOUTH CONGRESS AVENUE  
PALM SPRINGS, FL 33461 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name GRAND, RYAN  
Address 1722 A SOUTH CONGRESS AVENUE  
City-State-Zip: PALM SPRINGS FL 33461

*I hereby 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 all other like empowered.*

**SIGNATURE:** RYAN GRAND

**PRESIDENT**

**02/05/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date