

2006 LIMITED PARTNERSHIP ANNUAL REPORT

**FILED
Apr 26, 2006
Secretary of State**

DOCUMENT# A22899

Entity Name: KENDALL THERAPY CENTER, LTD.

Current Principal Place of Business:

ONE PARK PLAZA
NASHVILLE, TN 37203 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 750
LEGAL DEPT
NASHVILLE, TN 37202 US

New Mailing Address:

FEI Number: 59-2717607 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

GENERAL PARTNER INFORMATION:

Document #: S71240
Name: COLUMBIA HOSPITAL CORP. OF SOUTH MIAMI
Address: ONE PARK PLAZA
City-St-Zip: NASHVILLE, TN 37203 US

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: DORA A. BLACKWOOD, VP OF GENERAL PARTNER

VPS

04/26/2006

Electronic Signature of Signing General Partner

_____ Date