

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000001747

FILED
Jun 22, 2009
Secretary of State

Entity Name: OCALA REGIONAL PHYSICAL THERAPY CENTER, LTD.

Current Principal Place of Business:

2620 S E MARICAMP RD.
OCALA, FL 34471

New Principal Place of Business:

2620 SE MARICAMP ROAD
OCALA, FL 34471

Current Mailing Address:

2620 S E MARICAMP RD.
OCALA, FL 34471

New Mailing Address:

1190 SE 17TH STREET
OCALA, FL 34471

FEI Number: 65-0773288 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

Name and Address of Current Registered Agent:

SHUTES, RICHARD W
2140 NE 36TH AVE, BLDG 300
OCALA, FL 34470 US

Name and Address of New Registered Agent:

SHUTES, RICHARD W
1190 SE 17TH STREET
OCALA, FL 34471 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

06/22/2009

Date

GENERAL PARTNER INFORMATION:

Document #: P97000064951
Name: R.W. SHUTES & ASSOCIATES, INC.
Address: 2140 NE 36TH AVE, BLDG 300
City-St-Zip: OCALA, FL 34470

ADDRESS CHANGES ONLY:

Address: 1190 SE 17TH STREET
City-St-Zip: OCALA, FL 34471

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 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: RICHARD W SHUTES

CEO

06/22/2009

Electronic Signature of Signing General Partner

Date