2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004497

Entity Name: PHYSIOTHERAPY CORPORATION

FILED Jan 23, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
101 LINDENWOOD DRIVE SUITE 420 MALVERN, PA 19355			SUITE 200	855 SPRINGDALE DRIVE SUITE 200 EXTON, PA 19341		
Current Mailing Address:			New Maili	New Mailing Address:		
101 LINDENWOOD DRIVE SUITE 420 MALVERN, PA 19355			855 SPRINGDALE DRIVE SUITE 200 EXTON, PA 19341			
FEI Number: 26-0493816 FEI Number Applied For () FEI Num			umber Not Appl	nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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				Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E CONNELLY, JAM 101 LINDENWOO MALVERN, PA 1	DD DRIVE 420	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CONNELLY, JAMES 855 SPRINGDALE DRIVE, SUITE 200 EXTON, PA 19341		
Title: Name: Address: City-St-Zip:	FLOYD, WILLIAM	DD DRIVE SUITE 420	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition FLOYD, WILLIAM 855 SPRINGDALE DRIVE, SUITE 200 EXTON, PA 19341		
Title: Name: Address: City-St-Zip:	FITZPATRICK, D	DD DRIVE SUITE 420	Title: Name: Address: City-St-Zip:	VPT (X) Change () Addition FITZPATRICK, DENNIS 855 SPRINGDALE DRIVE, SUITE 200 EXTON, PA 19341		
Title: Name: Address: City-St-Zip:	BINSTEIN, RICHA	DD DRIVE SUITE 420	Title: Name: Address: City-St-Zip:	S (X) Change () Addition BINSTEIN, RICHARD S 855 SPRINGDALE DRIVE, SUITE 200 EXTON, PA 19341		
Title: Name: Address: City-St-Zip:	GONYO, JEFFRE	DD DRIVE SUITE 420	Title: Name: Address: City-St-Zip:	D (X) Change () Addition GONYO, JEFFREY 855 SPRINGDALE DRIVE, SUITE 200 EXTON, PA 19341		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD BINSTEIN S 01/23/2008

() Delete

101 LINDENWOOD DRIVE SUITE 420

KIRPATRICK III, HARRELD

MALVERN, PA 19355

Title:

Name:

Address:

City-St-Zip:

(X) Change () Addition

KIRPATRICK III, HARRELD

EXTON, PA 19341

855 SPRINGDALE DRIVE, SUITE 200