

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 05, 2012
Secretary of State

Entity Name: WALBRIDGE PHYSICAL MEDICINE AND REHABILITATION., P.C.

Current Principal Place of Business:

1112 RIVERVIEW LANE
CONSHOHOCKEN, PA 194282964

New Principal Place of Business:

Current Mailing Address:

1112 RIVERVIEW LANE
CONSHOHOCKEN, PA 194282964

New Mailing Address:

FEI Number: 14-7761890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLALOCK WALTERS HELD & JOHNSON, P.A.
802 11TH ST W
BRADENTON, FL 342057734 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

OFFICERS AND DIRECTORS:

Title: CPT
Name: LIPNACK, ERIC M D.O.
Address: 7140 TRADITION COVE E
City-St-Zip: W PALM BEACH, FL 33412

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: ERIC M. LIPNACK

DR

03/05/2012

Electronic Signature of Signing Officer or Director

Date