

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

COMM - 1 / 1110: 34

ORANGE PHYSICAL THERAPY
WILKINSON, FLORIDA

DOCUMENT # F49460 (1)

1. Corporation Name

ORANGE PHYSICAL THERAPY AND SPORTS REHABILITATION, INC.

Principal Office Address

5517 HANSEL AVE
ORLANDO FL 32809

Mailing Address

5517 HANSEL AVE
ORLANDO FL 32809

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Organized
10/12/1981

3a. Date of Last Report
05/01/1994

4. FID Number
59-2141114

Applied Fee
Paid Application

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has been subject to and complied with the provisions of the Florida Statutes ☐ Yes ☐ No

2. Principal Office Address

21. State of Florida

2a. Mailing Address

26. State of Florida

22. City, State

27. City, State

23. City, State

28. City, State

24. City, State

25. City, State

29. City, State

30. City, State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROOFNER, MARILYN A
636 W SECOND AVE
WINDEMERE FL 32786

81. Name

82. Mailing Address (P.O. Box Number or Florida Address)

83. City, State

84. City, State

FL

85. City, State

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct statement of the facts as the same appear from the records of the Department of State, and that the same are true and correct as the same appear from the records of the Department of State, and that the same are true and correct as the same appear from the records of the Department of State.

12. OFFICERS AND DIRECTORS

ADDITIONAL NAMES TO BE ENTERED HERE (SEE INSTRUCTIONS)

NAME

PD
ROOFNER, MARILYN A
5517 HANSEL AVE
ORLANDO, FL 32809

NAME

S
HOLLAND, MARLENE
5517 HANSEL AVE
ORLANDO, FL 32809

NAME

VD
ROOFNER, LARRY
5517 HANSEL AVE
ORLANDO, FL 32809

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

NAME

SIGNATURE: *Marlene B. Holland*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95 407-647-6649