

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J67017

FILED
Mar 20, 2009
Secretary of State

Entity Name: TALLAHASSEE ORTHOPEDIC & SPORTS PHYSICAL THERAPY, INC.

Current Principal Place of Business:

3334 CAPITAL MEDICAL BLVD 300
TALLAHASSEE, FL 323081416

New Principal Place of Business:

Current Mailing Address:

3231 CAPITAL MEDICAL BLVD
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-2831494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNISLEY, KENT
3334 CAPITAL MEDICAL BLVD
SUITE 300
TALLAHASSEE, FL 32308 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KNISLEY, KENT CHARLES
Address: 3334 CAPITAL MED BLVD300
City-St-Zip: TALLAHASSEE, FL

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KNISLEY, KENT CHARLES
Address: 3334 CAPITAL MED BLVD300
City-St-Zip: TALLAHASSEE, FL 32308

Title: CEO () Change (X) Addition
Name: KNISLEY, KENT CHARLES
Address: 2887 CRAWFORDVILLE HWY
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: CEO () Change (X) Addition
Name: KNISLEY, KENT CHARLES
Address: THAGARD CLINIC FLORIDA STATE UNIVERSITY
City-St-Zip: TALLAHASSEE, FL 32306

Title: CEO () Change (X) Addition
Name: KNISLEY, KENT CHARLES
Address: 257 SW DADE ST
City-St-Zip: TALLAHASSEE, FL 32340

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.

SIGNATURE: KENT KNISLEY

CEO

03/20/2009

Electronic Signature of Signing Officer or Director

Date