

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016485

Entity Name: FRANK'S THERAPY, LLC

FILED
May 03, 2010
Secretary of State

Current Principal Place of Business:

19090 TWO RIVER LANE
BOCA RATON, FL 33498

New Principal Place of Business:

Current Mailing Address:

19090 TWO RIVER LANE
BOCA RATON, FL 33498

New Mailing Address:

FEI Number: 04-3693777 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FRIEDLAND, FRANK
19090 TWO RIVER LANE
BOCA RATON, FL 33498 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: FRIEDLAND, F.
Address: 19090 TWO RIVER LANE
City-St-Zip: BOCA RATON, FL 33498

Title: MGRM
Name: FRIEDLAND, RACHELLE
Address: 19090 TWO RIVER LANE
City-St-Zip: BOCA RATON, FL 33498

Title: MGRM
Name: FRIEDLAND, DEAN
Address: 19090 TWO RIVER LANE
City-St-Zip: BOCA RATON, FL 33498

Title: MGRM
Name: FRIEDLAND, JADE
Address: 19090 TWO RIVER LANE
City-St-Zip: BOCA RATON, FL 33498

I hereby 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FRANK FRIEDLAND

MGRM

05/03/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date