

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049271

FILED
Apr 06, 2011
Secretary of State

Entity Name: FLORIDA GULFCOAST PHYSICAL THERAPY LLC

Current Principal Place of Business:

20321 GRANDE OAK SHOPPES BLVD
SUITE 304
ESTERO, FL 33928

New Principal Place of Business:

10011 ESTERO TOWN COMMONS PL
SUITE 101A
ESTERO, FL 33928

Current Mailing Address:

20321 GRANDE OAK SHOPPES BLVD
SUITE 304
ESTERO, FL 33928

New Mailing Address:

10011 ESTERO TOWN COMMONS PL
SUITE 101A
ESTERO, FL 33928

FEI Number: 02-0726165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: PIRRO, DEREK M
Address: 17533 ALLENTOWN ROAD
City-St-Zip: FORT MYERS, FL 33912

Title: MGR
Name: METRICK, GLEN F
Address: 1639 MENLO RD
City-St-Zip: FORT MYERS, FL 33901

Title: S
Name: PIRRO, LARISSA D
Address: 17533 ALLENTOWN ROAD
City-St-Zip: FORT MYERS, FL 33912

Title: T
Name: METRICK, NANCY L
Address: 1639 MENLO RD
City-St-Zip: FORT MYERS, FL 33901

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: GLEN F. METRICK

MGR

04/06/2011

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