2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# L04000075763

Entity Name: ADVANCED MEDICAL AND PHYSICAL THERAPY SYSTEMS LLC

Current Principal Place of Business:

501 VILLAGE BLVD.
WEST PALM BEACH, FL 33409

New Principal Place of Business:

9623 ROYCE DR.
TAMPA, FL 33626

Current Mailing Address:

9700 WYETH COURT
WELLINGTON, FL 33414

New Mailing Address:

9623 ROYCE DR.
TAMPA, FL 33626

FEI Number: 20-1711655 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STAFFORD, DAMON J
9700 WYETH COURT
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

STAFFORD, DAMON J
9623 ROYCE DR.
TAMPA, FL 33626 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: DAMON STAFFORD 04/25/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: STAFFORD, DAMON J
Address: 9700 WYETH COURT
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: STAFFORD, DAMON J
Address: 9623 ROYCE DRIVE
City-St-Zip: TAMPA, FL 33626

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 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: DAMON STAFFORD MGR 04/25/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date