2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2010
Secretary of State

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Entity Name: THERAPY PROPERTIES, LLC

Current Principal Place of Business:

502 NORTH MACARTHUR AVE
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

621 NORTH MARTIN LUTHER KING
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 20-3858236 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAMIREZ, JESUS M M.D.
211 S. COVE TERRACE DRIVE
PANAMA CITY, FL 32401 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: MGRM
Name: RAMIREZ, JESUS M M.D.
Address: 211 S. COVE TERRACE DRIVE
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM
Name: WONG, LARRY T D.O.
Address: 2900 TUPELO DRIVE
City-St-Zip: PANAMA CITY, FL 32405

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 Statues.

SIGNATURE: JESUS M. RAMIREZ DR. 01/19/2010

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