

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000009909

**FILED
Apr 13, 2012
Secretary of State**

Entity Name: QUALITY THERAPY & SENIORS FITNESS CENTER, LLC

Current Principal Place of Business:

3105 INNOVATION DRIVE
ST. CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:
3105 INNOVATION DRIVE
ST. CLOUD, FL 34769

New Mailing Address:

FEI Number: 05-0632060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICONG, JULIUS
3105 INNOVATION DRIVE
ST. CLOUD, FL 34769 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: LICONG, JULIUS C
Address: 3105 INNOVATION DRIVE
City-St-Zip: ST. CLOUD, FL 34769

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: JULIUS C. LICONG

MGRM

04/13/2012

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