

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000010048

FILED
Feb 21, 2007
Secretary of State

Entity Name: JOINT EFFORT PHYSICAL THERAPY, LLC

Current Principal Place of Business:

2560 WYNDAM BAY PLACE
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

2560 WYNDAM BAY PLACE
APOPKA, FL 32703

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIMMERMAN, JOYLIN C
2560 WYNDAM BAY PLACE
APOPKA, FL 32703 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 () Delete
Name: ZIMMERMAN, JOYLIN C
Address: 2560 WYNDAM BAY PLACE
City-St-Zip: APOPKA, FL 32703

Title: MGR () Delete
Name: ZIMMERMAN, SHAWN L
Address: 2560 WYNDAM BAY PLACE
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHAWN L. ZIMMERMAN

MGR

02/21/2007

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