

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000010048

FILED
Jan 08, 2012
Secretary of State

Entity Name: JOINT EFFORT MANUAL PHYSICAL THERAPY, LLC

Current Principal Place of Business:

100 EAST SYBELIA AVE
SUITE 150
MAITLAND, FL 32751 US

New Principal Place of Business:

549 N. WYMORE ROAD
SUITE 209
MAITLAND, FL 32751 US

Current Mailing Address:

100 EAST SYBELIA AVE
SUITE 150
MAITLAND, FL 32751 US

New Mailing Address:

549 N. WYMORE ROAD
SUITE 209
MAITLAND, FL 32751 US

FEI Number: 03-0580986

FEI Number Applied For ()

FEI Number Not Applicable ()

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
Name: ZIMMERMAN, JOYLIN C
Address: 2560 WYNDAM BAY PLACE
City-St-Zip: APOPK, FL 32703 US

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

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: SHAWN ZIMMERMAN

MGR

01/08/2012

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