

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109705

Entity Name: ONSHORE THERAPY, PLC

FILED
Mar 21, 2011
Secretary of State

Current Principal Place of Business:

179 ORLANDO DRIVE
TAVERNIER, FL 33070

New Principal Place of Business:

92410 OVERSEAS HIGHWAY
SUITE 6
TAVERNIER, FL 33070

Current Mailing Address:

179 ORLANDO DRIVE
TAVERNIER, FL 33070

New Mailing Address:

92410 OVERSEAS HIGHWAY
SUITE 6
TAVERNIER, FL 33070

FEI Number: 90-0398038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROCKETT, LEANN D
179 ORLANDO DRIVE
TAVERNIER, FL 33070 US

Name and Address of New Registered Agent:

CROCKETT, LEANN D
92410 OVERSEAS HIGHWAY
SUITE 6
TAVERNIER, FL 33070 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: LEANN CROCKETT, MSPT

03/21/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: CROCKETT, LEANN D
Address: 92410 OVERSEAS HIGHWAY SUITE 6
City-St-Zip: TAVERNIER, FL 33070

Title: S
Name: CROCKETT, CLAY C
Address: 179 ORLANDO DRIVE
City-St-Zip: TAVERNIER, FL 33070

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: LEANN CROCKETT, MSPT

MGRM

03/21/2011

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