

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000097276

FILED  
Feb 04, 2009  
Secretary of State

**Entity Name:** PRO MOTION THERAPY OF LAKE CITY, LLC

**Current Principal Place of Business:**

289 SOUTH WEST STONEGATE TERRACE  
SUITE 101  
LAKE CITY, FL 32024 US

**New Principal Place of Business:**

**Current Mailing Address:**

289 SOUTH WEST STONEGATE TERRACE  
SUITE 101  
LAKE CITY, FL 32024 US

**New Mailing Address:**

**FEI Number:** 90-0336865

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SGANGA, BRIAN J ESQ.  
356 SOUTH MARION STREET  
LAKE CITY, FL 32025 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 ( ) Delete  
Name: SGANGA, MELINDA D  
Address: 289 SOUTH WEST STONEGATE TERRACE, STE. 101  
City-St-Zip: LAKE CITY, FL 32024

Title: MGRM ( ) Delete  
Name: SGANGA, BRIAN J  
Address: 356 S. MARION ST.  
City-St-Zip: LAKE CITY, FL 32025

**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 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: BRIAN J. SGANGA

MGRM

02/04/2009

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