2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2011
Secretary of State

DOCUMENT# L08000031442

Entity Name: CENTRAL FLORIDA THERAPY ASSOCIATES, LLC

Current Principal Place of Business:

8686A COUNTY ROAD 466
THE VILLAGES, FL 32162 US

New Principal Place of Business:

Current Mailing Address:

8686A COUNTY ROAD 466
THE VILLAGES, FL 32162 US

New Mailing Address:

FEI Number: 26-2279019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE MILLHORN LAW FIRM, LLC
13710 US HIGHWAY 441
SUITE 100
THE VILLAGES, FL 32159 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: MAGNUSON, CAMILLE L
Address: 8686A COUNTY ROAD 466
City-St-Zip: THE VILLAGES, FL 32162 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 Statues.

SIGNATURE: CAMILLE L. MAGNUSON MGRM 03/17/2011

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