

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000033210

FILED
Mar 18, 2010
Secretary of State

Entity Name: PHYSICAL THERAPY INSTITUTE OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

10894 CANYON BAY LANE
BOYNTON BEACH, FL 33473 US

New Principal Place of Business:

4175 CONGRESS AVE
SUITE W
LAKE WORTH, FL 33467 US

Current Mailing Address:

10894 CANYON BAY LANE
BOYNTON BEACH, FL 33473 US

New Mailing Address:

PO BOX 541556
GREENACRES, FL 33454 US

FEI Number: 27-1234784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLERA, DAYNA
10894 CANYON BAY LANE
BOYNTON BEACH, FL 33473 US

Name and Address of New Registered Agent:

ASHI, SIMON
59 LEGACY COURT
DELRAY BEACH, FL 33445 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: SIMON ASHI

03/18/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BOLERA, DAYNA
Address: 10894 CANYON BAY LANE
City-St-Zip: BOYNTON BEACH, FL 33473 US

Title: MGRM
Name: ASHI, SIMON
Address: 59 LEGACY COURT
City-St-Zip: DELRAY BEACH, FL 33445 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: DAYNA BOLERA

MGRM

03/18/2010

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