2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2011
Secretary of State

DOCUMENT# L10000056189

Entity Name: ISAAC NEWMAN THERAPY SERVICES, LLC

Current Principal Place of Business:

1312 NE CLOVER AVE
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

1312 NE CLOVER AVE
MADISON, FL 32340

New Mailing Address:

FEI Number: 80-0603960 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEWMAN, ISAAC
1312 NE CLOVER AVE
MADISON, FL 32340 US

Name and Address of New Registered Agent:

NEWMAN, WILLIAM I
1312 NE CLOVER AVE
MADISON, FL 32340 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: WILLIAM ISAAC NEWMAN 04/30/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: NEWMAN, WILLIAM I
Address: 1312 NE CLOVER AVE
City-St-Zip: MADISON, FL 32340

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: WILLIAM ISAAC NEWMAN MGR 04/30/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date