2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2012
Secretary of State

DOCUMENT# L10000062533

Entity Name: WOMEN'S MANUAL PHYSICAL THERAPY LLC

Current Principal Place of Business:

321 NORTH MAIN STREET
CRESTVIEW, FL 32536 US

New Principal Place of Business:

602 SOUTH MAIN ST
CRESTVIEW, FL 32536 US

Current Mailing Address:

PO BOX 1772
CRESTVIEW, FL 32536 US

New Mailing Address:

FEI Number: 27-2835024 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JENKINS, RUTH F
321 NORTH MAIN STREET
CRESTVIEW, FL 32536 US

Name and Address of New Registered Agent:

JENKINS, RUTH F
602 SOUTH MAIN ST
CRESTVIEW, FL 32536 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: _____ 04/29/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: JENKINS, RUTH F
Address: 602 SOUTH MAIN STREET
City-St-Zip: CRESTVIEW, FL 32536 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: RUTH F JENKINS MGRM 04/29/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date