

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000091029

FILED
Feb 16, 2012
Secretary of State

Entity Name: ABILITY PHYSICAL THERAPY, LLC

Current Principal Place of Business:

1200 LEXINGTON GREEN LANE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

1200 LEXINGTON GREEN LANE
SANFORD, FL 32771

New Mailing Address:

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

Name and Address of Current Registered Agent:

GUERRINA, JOHN
1200 LEXINGTON GREEN LANE
SANFORD, FL 32771 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: ABILITY HEALTH SERVICES, INC.
Address: 1200 LEXINGTON GREEN LANE
City-St-Zip: SANFORD, FL 32771

Title: MGRM
Name: FERRINGTON PHYSICAL THERAPY, LLC
Address: 9100 VANCE STREET, APT 721
City-St-Zip: WESTMINSTER, CO 80021

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: MARK TRACEY

MANA

02/16/2012

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