

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000035606

FILED
Apr 30, 2012
Secretary of State

Entity Name: PRIMECARE PHYSICAL THERAPY, LLC

Current Principal Place of Business:

2385 NW EXECUTIVE CENTER DR.
SUITE 100
BOCA RATON, FL 33431

New Principal Place of Business:

2133 VININGS CIRCLE
107
WELLINGTON, FL 33414

Current Mailing Address:

2385 NW EXECUTIVE CENTER DR.
SUITE 100
BOCA RATON, FL 33431

New Mailing Address:

2133 VININGS CIRCLE
107
WELLINGTON, FL 33414

FEI Number: 45-1030493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SY, MALFA S
320 PLAZA REAL
411
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

SY, MALFA S
2133 VININGS CIRCLE
107
WELLINGTON, FL 33414 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: MALFA SY

04/30/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: SY, MALFA S
Address: 320 PLAZA REAL APT.411
City-St-Zip: BOCA RATON, FL 33432

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: MALFA SY

MISS

04/30/2012

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