2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2012
Secretary of State

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Entity Name: NOKOMIS PHYSICAL THERAPY, LLC

Current Principal Place of Business:

109 LAUREL RD EAST
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

4964 FRUITVILLE RD
SARASOTA, FL 34232

New Mailing Address:

109 LAUREL RD EAST
NOKOMIS, FL 34275

FEI Number: 45-3032106 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KENNETH, TRIBIT I
1690 SWEETLAND ST
NOKOMIS, FL 34275 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: MGR
Name: TRIBIT, KENNETH I
Address: 1690 SWEETLAND ST
City-St-Zip: NOKOMIS, FL 34275

Title: MGR
Name: JORDAN, JUSTIN A
Address: 104 AMALFIE RD
City-St-Zip: NOKOMIS, FL 34275

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: JUSTIN JORDAN MGR 04/17/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date