

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L32742

FILED
May 01, 2006
Secretary of State

Entity Name: SUNCOAST PHYSICAL TRAINING AND REHABILITATION CENTER, INC.

Current Principal Place of Business:

6170 ULMERTON RD
STE 103
CLEARWATER, FL 33760 US

Current Mailing Address:

P O BOX 6813
CLEARWATER, FL 33760 US

New Principal Place of Business:

4625 EAST BAY DRIVE
STE 204
CLEARWATER, FL 33764 US

New Mailing Address:

P O BOX 6813
CLEARWATER, FL 337586813 US

FEI Number: 59-2982214

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, ALLEN D
6170 ULMERTON ROAD
STE 103
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

JONES, D ALLEN
4625 EAST BAY DRIVE
STE 204
CLEARWATER, FL 33764 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: D. ALLEN JONES, R.P.T.

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: RPT () Delete
Name: JONES, D. A
Address: 6170 ULMERTON ROAD #103
City-St-Zip: CLEARWATER, FL 33760 US

Title: RPT () Delete
Name: JONES, ALLEN D
Address: 6170 ULMERTON ROAD #103
City-St-Zip: CLEARWATER, FL 33760 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: RPT (X) Change () Addition
Name: JONES, D. ALLEN
Address: 4625 EAST BAY DRIVE, #204
City-St-Zip: CLEARWATER, FL 33764 US

Title: RPT (X) Change () Addition
Name: JONES, D ALLEN
Address: 4625 EAST BAY DRIVE, #204
City-St-Zip: CLEARWATER, FL 33764 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: D. ALLEN JONES

RPT

05/01/2006

Electronic Signature of Signing Officer or Director

Date