2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2012
Secretary of State

DOCUMENT# L60442

Entity Name: PHYSICAL THERAPY HOME CARE, INC.

Current Principal Place of Business:

8140 BAYHAVEN DR.
SEMINOLE, FL 33776 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4815
SEMINOLE, FL 33775 US

New Mailing Address:

FEI Number: 59-2999474 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACCOLLOM, STUART
8140 BAYHAVEN DR
SEMINOLE, FL 33776 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

OFFICERS AND DIRECTORS:

Title: P/T
Name: MACCOLLOM, ELAINE
Address: 8140 BAYHAVEN DR.
City-St-Zip: SEMINOLE, FL 33776

Title: VP
Name: MACCOLLOM, STUART
Address: 8140 BAYHAVEN DR.
City-St-Zip: SEMINOLE, FL 33776

I hereby 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 all other like empowered.

SIGNATURE: ELAINE R. MACCOLLOM P/T 01/22/2012

Electronic Signature of Signing Officer or Director Date