

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L90484

FILED
Jan 06, 2010
Secretary of State

Entity Name: THE PHYSICAL THERAPY EQUIPMENT COMPANY

Current Principal Place of Business:

P. O. BOX 271469
TAMPA, FL 336881469 US

New Principal Place of Business:

9268 LAZY LANE
TAMPA, FL 33614 US

Current Mailing Address:

P. O. BOX 271469
TAMPA, FL 336881469 US

New Mailing Address:

FEI Number: 59-3054519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADDEN, WILLIAM J PRESIDE
16222 PARKSIDE DR
TAMPA, FL 33624 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD
Name: MADDEN, WILLIAM J PTD
Address: 16222 PARKSIDE DRIVE
City-St-Zip: TAMPA, FL 33624 US

Title: VSD
Name: MADDEN, KARIN B VSD
Address: 16222 PARKSIDE DRIVE
City-St-Zip: TAMPA, FL 33624 US

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: WILLIAM J. MADDEN

PRES

01/06/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date