2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001327

Entity Name: PHYSICAL THERAPY CENTERS FLORIDA GROUP, L.C.

FILED Feb 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1190 S.E. 17TH STREET 2140 NE 36TH AVE OCALA, FL 34471 BLDG 300

OCALA, FL 34470

Current Mailing Address: New Mailing Address:

 2140 NE 36TH AVENUE
 2140 NE 36TH AVE

 BLDG 300
 BLDG 300

 OCALA, FL 34470
 OCALA, FL 34470

FEI Number: 59-3562884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHUTES, RICHARD W 2140 NE 36TH AVENUE BLDG 300 OCALA, FL 34470 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 SHUTES, RICHARD W
 Name:

 Address:
 2584 NEWFOUND HARBOR DRIVE
 Address:

 City-St-Zip:
 MERRITT ISLAND, FL 32952
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: RICHARD W. SHUTES MGR 02/25/2008