2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# M02000002135

Entity Name: ADVANCE PHYSICAL THERAPY NETWORK, LLC

Current Principal Place of Business:

401 EAST LAS OLAS BLVD
1100
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

401 EAST LAS OLAS BLVD
1100
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 82-0555629 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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/MEMBERS:

Title:	MGR	( ) Delete
Name:	CHAPMAN, HARRY	
Address:	2500 CITY WEST BLVD., SUITE 1150	
City-St-Zip:	HOUSTON, TX 77042	
Title:	MGR	( ) Delete
Name:	MICALE, JOHN J	
Address:	2500 CITY WEST BLVD., SUITE 1150	
City-St-Zip:	HOUSTON, TX 77042	
Title:	MGR	( ) Delete
Name:	GRUVERMAN, HOWARD	
Address:	200 EAST BROWARD BLVD., SUITE 1125	
City-St-Zip:	FT. LAUDERDALE, FL 33301	
Title:	MGR	( ) Delete
Name:	CANELO, RAFAEL	
Address:	200 EAST BROWARD BLVD., SUITE 1125	
City-St-Zip:	FT. LAUDERDALE, FL 33301	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RAFAEL CANELO PRES 04/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date