

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10681

FILED
Apr 27, 2011
Secretary of State

Entity Name: THE SOUTHEAST DISTRICT OF THE FLORIDA PHYSICAL THERAPY ASSOCIATION, INC.

Current Principal Place of Business:

13529 NW 5TH COURT
PLANTATION, FL 33325 US

New Principal Place of Business:

2505 METROCENTER BOULEVARD, SUITE 201
WEST PALM BEACH, FL 33407 US

Current Mailing Address:

13529 NW 5TH COURT
PLANTATION, FL 33325 US

New Mailing Address:

2505 METROCENTER BOULEVARD, SUITE 201
WEST PALM BEACH, FL 33407 US

FEI Number: 59-2622647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENUTO, PAUL
13529 NW 5TH COURT
PLANTATION, FL 33325 US

Name and Address of New Registered Agent:

BEAL, JENNIFER
2505 METROCENTER BOULEVARD, SUITE 201
WEST PALM BEACH, FL 33407 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: JENNIFER BEAL

04/27/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CH
Name: BEAL, JENNIFER
Address: 2505 METROCENTER BOULEVARD, SUITE 201
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: CH
Name: MULCAHY, ALAN
Address: 6320 WOOD LAKE ROAD
City-St-Zip: JUPITER, FL 33458 US

Title: SEC
Name: RICE, DENIE L
Address: 8400 PINE TREE LANE
City-St-Zip: WEST PALM BEACH, FL 33406 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER BEAL

CH

04/27/2011

Electronic Signature of Signing Officer or Director

Date