

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009250

FILED
Apr 29, 2012
Secretary of State

Entity Name: CUTIEPATOOTIES THERAPY SERVICES, INC.

Current Principal Place of Business:

3574 LIVE OAK HOLLOW DRIVE
ORANGE PARK, FL 32065

New Principal Place of Business:

3574 LIVE OAK HOLLOW DRIVE
ORANGE PARK, FL 32065

Current Mailing Address:

3574 LIVE OAK HOLLOW DRIVE
ORANGE PARK, FL 32065

New Mailing Address:

3574 LIVE OAK HOLLOW DRIVE
ORANGE PARK, FL 32065

FEI Number: 45-3553765

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NAYLOR, NOVIS T
3574 LIVE OAK HOLLOW DRIVE
ORANGE PARK, FL 32065 US

Name and Address of New Registered Agent:

NAYLOR, NOVIS T
3574 LIVE OAK HOLLOW DRIVE
ORANGE PARK, FL 32065 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:

04/29/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: NAYLOR, NOVIS T
Address: 3574 LIVE OAK HOLLOW DRIVE
City-St-Zip: ORANGE PARK, FL 32065

Title: D
Name: NAYLOR, MICHAEL
Address: 3574 LIVE OAK HOLLOW DRIVE
City-St-Zip: ORANGE PARK, FL 32065

Title: D
Name: GETER, BRENDA
Address: 900 MATUNUCK COURT
City-St-Zip: VIRGINIA BEACH, VA 23452

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: NOVIS T. NAYLOR

DP

04/29/2012

Electronic Signature of Signing Officer or Director

Date