

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000036098

Entity Name: HORIZON THERAPY CENTER, INC.

FILED
Oct 14, 2009
Secretary of State

Current Principal Place of Business:

7135 STATE ROAD 52
SUITE 204
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

7135 STATE ROAD 52
SUITE 204
HUDSON, FL 34667

New Mailing Address:

FEI Number: 59-3717469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORAK, JULIE A
7135 STATE RD. 52
STE. 204
HUDSON, FL 34667 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: JULIE HORAK

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HORAK, JULIE
Address: 7135 STATE RD 52 STE 204
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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 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 an address, with all other like empowered.

SIGNATURE: JULIE HORAK

Electronic Signature of Signing Officer or Director

PRES

10/14/2009

Date