

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000080146

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: PHYSICAL THERAPY MASTERS, PA

## Current Principal Place of Business:

1763 GRASSINGTON WAY S  
JACKSONVILLE, FL 32223

## New Principal Place of Business:

## Current Mailing Address:

1763 GRASSINGTON WAY S  
JACKSONVILLE, FL 32223

## New Mailing Address:

FEI Number: 59-3738448

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAMP, RICHARD  
4110 SOUTHPPOINT BLVD #205  
JACKSONVILLE, FL 32216 US

## Name and Address of New Registered Agent:

BLOMGREN, CAROL A MPT  
1763 GRASSINGTON WAY SOUTH  
JACKSONVILLE, FL 32223 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: CAROL A. BLOMGREN, MPT

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P, D ( ) Delete  
Name: BLOMGREN, CAROL A  
Address: 1763 GRASSINGTON WAY S  
City-St-Zip: JACKSONVILLE, FL 32223

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change ( ) Addition  
Name: BLOMGREN, CAROL A MPT  
Address: 1763 GRASSINGTON WAY S  
City-St-Zip: JACKSONVILLE, FL 32223

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL A. BLOMGREN, MPT

P

01/05/2006

Electronic Signature of Signing Officer or Director

Date