

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108857

Entity Name: K & L THERAPY SERVICES, INC.

FILED
Feb 03, 2008
Secretary of State

Current Principal Place of Business:

308 CASA MARINA PLACE
SANFORD, FL 32771 US

New Principal Place of Business:

7209 CURRY FORD ROAD
E
ORLANDO, FL 32822 US

Current Mailing Address:

P.O.BOX 621016
OVIEDO, FL 32762 US

New Mailing Address:

7209 CURRY FORD ROAD
E
ORLANDO, FL 32822 US

FEI Number: 02-0650450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOURDES MERCADO-SANTIAGO
308 CASA MARINA PLACE
SANFORD, FL 32771 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: SANTIAGO, LOURDES M
Address: 308 CASA MARINA PLACE
City-St-Zip: SANFORD, FL 32771

Title: O () Delete
Name: NAIDU, KAVITHA
Address: 2987 SUMMER SWAN DRIVE
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LOURDES M. SANTIAGO

PRES

02/03/2008

Electronic Signature of Signing Officer or Director

Date