2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046148

Entity Name: CHILDREN'S THERAPY NETWORK, INC.

FILED Mar 19, 2012 Secretary of State

Current Principal Place of Busin	ess:	New Principal Place of	Business:	
315 NORTH RIDGEWOOD AVE. EDGEWATER, FL 32132				
Current Mailing Address:		New Mailing Address:		
315 NORTH RIDGEWOOD AVE. EDGEWATER, FL 32132				
FEI Number: 20-2576779 FEI Num	ber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
JOHNSON, GINA 316 TWO OAKS DRIVE EDGEWATER, FL 32141 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:				
Electronic Signatu	ure of Registered Agent	t	Date	

OFFICERS AND DIRECTORS:

Title: PVST

Name: JOHNSON, GINA
Address: 316 TWO OAKS DRIVE
City-St-Zip: EDGEWATER, FL 32141

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GINA JOHNSON PVST 03/19/2012