

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000136685

Entity Name: SPINE SPORTS THERAPY, INC.

FILED  
Jan 04, 2007  
Secretary of State

## Current Principal Place of Business:

4021 CENTRAL AVENUE, SUITE C  
ST. PETERSBURG, FL 33713

## New Principal Place of Business:

2117 49 ST N  
ST. PETERSBURG, FL 33710

## Current Mailing Address:

4021 CENTRAL AVENUE, SUITE C  
ST. PETERSBURG, FL 33713

## New Mailing Address:

2117 49 ST N  
ST. PETERSBURG, FL 33710

FEI Number: 20-3578195

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCOTT T LODEN CPA, PA  
4601 CENTRAL AVENUE  
ST PETERSBURG, FL 33713 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: P ( ) Delete  
Name: JOHNSON, TIMOTHY E  
Address: 7841 3RD AVENUE S  
City-St-Zip: ST PETERSBURG, FL 33709

## 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 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: TIMOTHY E. JOHNSON

OWNE

01/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date