

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077435

FILED
Jul 05, 2007
Secretary of State

Entity Name: FIVE STAR PHYSICAL THERAPY, INC.

Current Principal Place of Business:

472 HOPKINS ST
NEPTUNE BEACH, FL 32266

New Principal Place of Business:

236 PONTE VEDRA PARK DRIVE
300
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

472 HOPKINS ST
NEPTUNE BEACH, FL 32266

New Mailing Address:

236 PONTE VEDRA PARK DRIVE
300
PONTE VEDRA BEACH, FL 32082

FEI Number: 20-4986362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, HENRIETTA E
925 3RD ST N
JACKSONVILLE BEACH, FL 32266 US

Name and Address of New Registered Agent:

WATSON, HENRIETTA E
236 CANAL BLVD
SUITE 1
PONTE VEDRA BEACH, FL 32082 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: HENRIETTA E WATSON

07/05/2007

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: P () Delete
Name: SERLO, MATTHEW
Address: 472 HOPKINS ST
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: VP () Delete
Name: JORGENSON, BRETT
Address: 8971 HAMPTON LANDING DRIVE
City-St-Zip: JACKSONVILLE, FL 32256

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: MATTHEW SERLO

P

07/05/2007

Electronic Signature of Signing Officer or Director

Date