2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 02, 2008
Secretary of State

DOCUMENT# P06000077435

Entity Name: FIVE STAR PHYSICAL THERAPY, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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
236 PONTE VEDRA PARK DRIVE
PONTE VEDRA BEACH, FL 32082 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

OFFICERS AND DIRECTORS:

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

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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

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 06/02/2008
Electronic Signature of Signing Officer or Director — Date