2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# P06000115579

Entity Name: ELLIS PHYSICAL THERAPY, INC.

Current Principal Place of Business:

309 WAVERLY CIRCLE
DAYTONA BEACH, FL 32118 US

New Principal Place of Business:

95 BUCKSKIN LN
ORMOND BEACH, FL 32174 US

Current Mailing Address:

309 WAVERLY CIRCLE
DAYTONA BEACH, FL 32118 US

New Mailing Address:

95 BUCKSKIN LN
ORMOND BEACH, FL 32174 US

FEI Number: 20-5501628 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANEY, SONYA L
116 E DUNLAWTON BLVD
SUITE 3
DAYTONA BEACH SHORES, FL FL 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: ELLIS, AMY L
Address: 309 WAVERLY CIRCLE
City-St-Zip: DAYTONA BEACH, FL 32118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ELLIS, AMY L
Address: 95 BUCKSKIN LN
City-St-Zip: ORMOND BEACH, FL 32174

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: AMY ELLIS, PT P 04/27/2009

Electronic Signature of Signing Officer or Director Date