

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000003933

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** THERAPY SOLUTIONS OF TAMPA BAY, INC.

**Current Principal Place of Business:**

2261 HANNAH WAY SOUTH  
DUNEDIN, FL 34698

**New Principal Place of Business:**

**Current Mailing Address:**

2261 HANNAH WAY SOUTH  
DUNEDIN, FL 34698

**New Mailing Address:**

**FEI Number:** 20-8208631

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHERPF, SHERI L  
2261 HANNAH WAY SOUTH  
DUNEDIN, FL 34698 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: MRS  
Name: SCHERPF, SHERI L PRES  
Address: 2261 HANNAH WAY S  
City-St-Zip: DUNEDIN, FL 34698 US

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: SHERI SCHERPF

PRES

02/21/2011

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

\_\_\_\_\_  
Date