2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2012
Secretary of State

DOCUMENT# P08000086728

Entity Name: PRO-MOTION PHYSICAL THERAPY OF VOLUSIA COUNTY, INC.

Current Principal Place of Business:

4550 S. CLYDE MORRIS BLVD.
SUITE D
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

PO BOX 290699
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 26-3399750 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YU, MARIE CARMEN
4550 S. CLYDE MORRIS BLVD.
SUITE D
PORT ORANGE, FL 32129 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: DD
Name: YU, MARIE CARMEN
Address: PO BOX 290699
City-St-Zip: PORT ORANGE, FL 32129

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: MARIE CARMEN YU PRES 04/19/2012

Electronic Signature of Signing Officer or Director — Date