

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000073724

**FILED**  
**Jan 21, 2012**  
**Secretary of State**

**Entity Name:** THERAPY SERVICES OF SFL, INC

**Current Principal Place of Business:**

7005 NW 40TH COURT  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

7005 NW 40TH COURT  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 27-0851435

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOUDREAU, OLGA A RPT  
7005 NW 40TH COURT  
CORAL SPRINGS, FL 33065 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  
Name: BOUDREAU, OLGA A RPT  
Address: 7005 NW 40TH COURT  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SEC  
Name: BOUDREAU, OLGA A RPT  
Address: 7005 NW 40TH COURT  
City-St-Zip: CORAL SPRINGS, FL 33065

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: OLGA BOUDREAU

PRES

01/21/2012

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

\_\_\_\_\_ Date