

2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Oct 16, 2012
Secretary of State**

DOCUMENT# P10000082267

Entity Name: BRIDGE REHABILITATION THERAPIES, INC.

Current Principal Place of Business:

714 MANATEE AVE EAST
BRADENTON, FL 34208

New Principal Place of Business:

714 MANATEE AVE EAST
SUITE C
BRADENTON, FL 34208

Current Mailing Address:

714 MANATEE AVE EAST
BRADENTON, FL 34208

New Mailing Address:

714 MANATEE AVE EAST
SUITE C
BRADENTON, FL 34208

FEI Number: 27-3647019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER-AVOINE, EVADNEY
714 MANATEE AVE EAST
BRADENTON, FL 34208 US

Name and Address of New Registered Agent:

MCDONALD, DEXTER N SR
714 MANATEE AVE EAST
SUITE C
BRADENTON, FL 34208 US

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: DEXTER N MCDONALD, SR

10/16/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MCDONALD, DEXTER N SR
Address: 714 MANATEE AVE EAST, SUITE C
City-St-Zip: BRADENTON, FL 34208

Title: MGR
Name: MCDONALD, DEXTRINA P
Address: 714 MANATEE AVE EAST, SUITE C
City-St-Zip: BRADENTON,, FL 34208

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: DEXTER N. MCDONALD

PD

10/16/2012

Electronic Signature of Signing Officer or Director

Date