2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2012
Secretary of State

DOCUMENT# P11000097899

Entity Name: CMS THERAPY SERVICES CORP

Current Principal Place of Business:

30039 US HWY 19 N
CLEARWATER, 33761

New Principal Place of Business:

30039 US HWY 19 N
CLEARWATER, FL 33761

Current Mailing Address:

30039 US HWY 19 N
CLEARWATER, 33761

New Mailing Address:

30039 US HWY 19 N
CLEARWATER, FL 33761

FEI Number: 45-3806929 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SERNA, CLAUDIA M
1006 FALCON RIDGE LN
PALM HARBOR, FL 34683 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: SERNA, CLAUDIA M
Address: 1006 FALCON RIDGE LN
City-St-Zip: PALM HARBOR, FL 34683

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: CLAUDIA M SERNA PRES 04/26/2012

Electronic Signature of Signing Officer or Director Date