2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2008
Secretary of State

DOCUMENT# P95000047879

Entity Name: ASSOCIATED THERAPY SERVICES, S.P., P.A.

Current Principal Place of Business:

1028 CREEL ST
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

906 S FOREST CREEK
ST AUGUSTINE, FL 32092 US

Current Mailing Address:

1028 CREEL ST
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

906 S FOREST CREEK
ST AUGUSTINE, FL 32092 US

FEI Number: 59-3326996 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCINTYRE, PATRICIA M
1028 CREEL ST
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

MCINTYRE, PATRICIA M
906 S FOREST CREEK
ST AUGUSTINE, FL 32092 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: 08/11/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: MCINTYRE, PATRICIA M
Address: 1028 CREEL ST
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: MCINTYRE, PATRICIA M
Address: 906 S FOREST CREEK
City-St-Zip: ST AUGUSTINE, FL 32092

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA MCINTYRE P 08/11/2008
Electronic Signature of Signing Officer or Director Date