

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000080077

Entity Name: M.D. THERAPY SERVICES, INC.

FILED
Jan 04, 2006
Secretary of State

Current Principal Place of Business:

2960 TAMPA RD.
PALM HARBOR, FL 34684 US

New Principal Place of Business:

Current Mailing Address:

2960 TAMPA RD.
PALM HARBOR, FL 34684 US

New Mailing Address:

FEI Number: 59-3369535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEXTON, TONI
2960 TAMPA RD.
PALM HARBOR, FL 34684 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SEXTON, TONI
Address: 3101 37TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SEXTON, TONI
Address: 3101 37TH AVENUE NORTH #A
City-St-Zip: ST. PETERSBURG, FL 33713

I hereby certify that the information supplied with this filing does not qualify for the 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: TONI SEXTON

PRES

01/04/2006

Electronic Signature of Signing Officer or Director

Date