

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000053577

FILED
Jun 20, 2005
Secretary of State

Entity Name: A STEP AHEAD PHYSICAL THERAPY, P.A.

Current Principal Place of Business:

1635 SAN MARCO RD
MARCO ISLAND, FL 34145 US

New Principal Place of Business:

Current Mailing Address:

601 ELKCAM CIRCLE E
SUITE A2-4
MARCO ISLAND, FL 34145

New Mailing Address:

FEI Number: 65-0679423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYER, SKIP
1635 SAN MARCO RD
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

CHAMBERS, SUNDI CPA
188 STANHOPE CIRCLE
NAPLES, FL 34104 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: SUNDI CHAMBERS

06/20/2005

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: PVPS () Delete
Name: MOYER, SKIP A
Address: 1635 SAN MARCO RD
City-St-Zip: MARCO ISLAND, FL 34145 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPS (X) Change () Addition
Name: MOYER, SKIP A
Address: 1635 SAN MARCO RD
City-St-Zip: MARCO ISLAND, FL 34145 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SKIP MOYER

PRES

06/20/2005

Electronic Signature of Signing Officer or Director

Date