


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2004 8:00 am
Secretary of State


08-17-2004 90001 049 ***150.00

DOCUMENT # P99000003230	
1. Entity Name JENSEN PHYSICAL THERPY, INC.	

Principal Place of Business: 702 JENSEN BEACH BLVD. JENSEN BEACH, FL 34957	Mailing Address 702 JENSEN BEACH BLVD. JENSEN BEACH, FL 34957
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

TALLAHASSEE, FLORIDA



07222004 Chg-P CR2E034 (10/03)

4. FEI Number 65-0896407	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
SAMPSON, CRAIG 2101 S.E. HERRON AVE. PORT ST. LUCIE, FL 34952	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAMPSON, CRAIG 2101 SE HERRON AVE PORT SAINT LUCIE, FL 34952 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, ELAINE 2485 S.E. SIDONIA ST. PORT ST. LUCIE, FL 34952 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRISON, NORMA 26 HIGH STREET APT.2 FT. PIERCE, FL 34982 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Craig Sampson **Craig Sampson** **8-11-04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
524068502

THE ANNUAL REPORT NOTICE WAS
NOT RECEIVED WHICH DELAYED OUR
FILING.

THANK YOU.

CRAIG SAMPSON
JENSEN PHYSICAL THERAPY
702 JENSEN BEACH BLVD.
JENSEN BEACH, FL 34957

REFEENCE #P99000003230



Attachment
54068502
Division of Corporations

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Document Number
P99000003230
Business Entity Name
JENSEN PHYSICAL THERPY, INC.

☒ After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received. (no prior notice received).

FEI Number **650896407**
FEI Number Status ☐ Applied For ☐ Not Applicable ☒ Current
Certificate of Status Desired ☐ Yes ☒ No

Principal Place of Business

Address **702 JENSEN BEACH BLVD.**
Suite, Apt. #, etc.
City, State **JENSEN BEACH**, **FL**
Zip Code & Country **34957**

Mailing Address

Address **702 JENSEN BEACH BLVD.**
Suite, Apt. #, etc.
City, State **JENSEN BEACH**, **FL**
Zip Code & Country **34957**

Name And Address of Registered Agent

Name (Last, First, Middle, Title) **SAMPSON**, **CRAIG**, ,
-or- RA Business Name
Address **2101 S.E. HERRON AVE.**
Suite, Apt. #, etc.
City, State **PORT ST. LUCIE**, **FL**
Zip Code & Country **34952** **US**

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered

Attachment
54068502
Division of Corporations

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Document Number
P99000003230
Business Entity Name
JENSEN PHYSICAL THERPY, INC.Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Officer/Director Name And Address

1
Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

2
Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

3
Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

4
Title
Name (Last, First, Middle, Title)
-or- Entity Name

Attachment

54068502 #P99000003230

Street Address

4755 26TH STREET

City, State

VERO BEACH

FL

Zip Code & Country

32966

US

Title

D

Name (Last, First, Middle, Title)

GIBSON

SALLY

-or- Entity Name

Street Address

1261 SE CORAL REEF STREET

City, State

PORT SAINT LUCIE

FL

Zip Code & Country

34983

US

Title

D

Name (Last, First, Middle, Title)

HASELL

GLENN

C

-or- Entity Name

Street Address

2646 SW MAPP RD, SUITE 204

City, State

PALM CITY

FL

Zip Code & Country

34990

US

☐ List more than six Officers/Directors ☒ No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

D

Officer/Director Signature

CRAIG SAMPSON

Continue

Reset

Start Over

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