

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000007467

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** ATLAS PHYSICAL THERAPY & SPORTS MEDICINE, INC.

**Current Principal Place of Business:**

12421 SAN JOSE BLVD  
SUITE 100  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

**Current Mailing Address:**

1789 GRASSINGTON WAY SOUTH  
JACKSONVILLE, FL 32223

**New Mailing Address:**

**FEI Number:** 59-3555232

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BERGER, RONALD C JR  
1789 GRASSINGTON WAY SOUTH  
JACKSONVILLE, FL 32223 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: D  
Name: BERGER, RONALD C JR  
Address: 1789 GRASSINGTON WAY SOUTH  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP  
Name: BERGER, RONALD C SR  
Address: 2200 KENT PLACE  
City-St-Zip: CLEARWATER, FL 33764

Title: S  
Name: BERGER, CHRISTINA F  
Address: 1789 GRASSINGTON WAY SOUTH  
City-St-Zip: JACKSONVILLE, FL 32223

Title: T  
Name: BERGER, ROXANNE G  
Address: 2200 KENT PLACE  
City-St-Zip: CLEARWATER, FL 33764

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: RONALD C BERGER JR

D

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date