2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2019
Secretary of State
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Entity Name: PHYSICAL THERAPY ASSOCIATES, P.A. IRA M. FIEBERT, PH.D., P.T. RITA N. MAGILL, P.T.

Current Principal Place of Business:

6280 SUNSET DRIVE
SUITE 405
SOUTH MIAMI, FL 33143

Current Mailing Address:

6280 SUNSET DRIVE
SUITE 405
SOUTH MIAMI, FL 33143 US

FEI Number: 59-2410767

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZANE, LINDA J
8297 BRIDLE PATH
BOCA RATON, FL 33496 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DPT	Title	DVS
Name	FIEBERT, IRA M	Name	MAGILL, RITA N
Address	8297 BRIDLE PATH	Address	1305 SW 107 TERR
City-State-Zip:	BOCA RATON FL 33496	City-State-Zip:	MIAMI FL 33186

Title	V
Name	ZANE, LINDA J.
Address	8297 BRIDLE PATH
City-State-Zip:	BOCA RATON FL 33496

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: LINDA ZANE FIEBERT VICE PRESIDENT 03/28/2019

Electronic Signature of Signing Officer/Director Detail — Date