2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2013
Secretary of State
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Entity Name: KIDWORKS THERAPY OF FLORIDA, INC.

Current Principal Place of Business:

545 KIRKWOOD TERRACE NORTH
ST PETERSBURG, FL 33701

Current Mailing Address:

P.O. BOX 7154
ST PETERSBURG, FL 33734 US

FEI Number: 20-0158018

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PESCOD, LAURA
545 KIRKWOOD TERRACE NORTH
ST PETERSBURG, FL 33701 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	P	Title	T
Name	PESCOD, LAURA L	Name	IRVIN, CHRISTOPHER G
Address	545 KIRKWOOD TER N	Address	P.O. BOX 7154
City-State-Zip:	ST PETERSBURG FL 33701	City-State-Zip:	SAINT PETERSBURG FL 33734

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: LAURA L. PESCOD PRESIDENT 04/10/2013

Electronic Signature of Signing Officer/Director Detail — Date