

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000111134

Entity Name: CHASE PEDIATRIC THERAPY SERVICES, INC.

Current Principal Place of Business:

2445 CYPRESS TRACE CIR
ORLANDO, FL 32825

Current Mailing Address:

2445 CYPRESS TRACE CIR
ORLANDO, FL 32825

FEI Number: 20-5437598

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHASE, LINDA T
2445 CYPRESS TRACE CIRCLE
ORLANDO, FL 32825 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: LINDA T CHASE

02/26/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CHASE, LINDA T
Address 2445 CYPRESS TRACE CIR
City-State-Zip: ORLANDO FL 32825

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 CHASE

PRESIDENT

02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date