## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000015822

Entity Name: AT HOME PHYSICAL THERAPY, P.A.

**Current Principal Place of Business:** 

11554 BIG SKY CT BOCA RATON. FL 33498

**Current Mailing Address:** 

11554 BIG SKY CT

BOCA RATON. FL 33498 US

FEI Number: 82-0667069 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAVALLO, NICOLA 11554 BIG SKY CT BOCA RATON, FL 33498 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

FILED Apr 29, 2019

**Secretary of State** 

8600655197CC

## Officer/Director Detail:

Title PTSD

Name CAVALLO, NICOLA Address 11554 BIG SKY CT

City-State-Zip: BOCA RATON FL 33498

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: NICOLA CAVALLO

**PRESODENT** 

04/29/2019

Date