## **2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000004181

Entity Name: T.H.E. THERAPY WORKS, LLC

**Current Principal Place of Business:** 

3138 LOCKWOOD STREET PORT CHARLOTTE. FL 33952

## **Current Mailing Address:**

3138 LOCKWOOD STREET PORT CHARLOTTE. FL 33952

FEI Number: 20-8225450 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KOWALCZYK, FRANCES M 3138 LOCKWOOD STREET PORT CHARLOTTE, FL 33952 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 Mar 21, 2013

**Secretary of State** 

CC1148801060

## Authorized Person(s) Detail:

Title MGRM

Name KOWALCZYK, FRANCES M
Address 3138 LOCKWOOD STREET
City-State-Zip: PORT CHARLOTTE FL 33952

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANCES M KOWALCZYK

**MANAGER** 

03/21/2013