Commonwealth of Kentucky Alison Lundergan Grimes, Secretary o

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Alison Lunderg Secretary o P. O. Box Frankfort, KY 4 (502) 564 http://www.so	of State 1150 0602-1150 -3490	Annual Report Online Filing	ARP
Company: Company ID: State of origin: Formation date: Date filed: Fee:	0778553 Kentucky 1/3/2011	E PHYSICAL THERAPY & REHABILITATIO)N SERVICES, PLLC
Define incl Office			
Principal Office 624 NORTH MAYSVILLE STREET			
MT. STERLING, KY 40353			
	1 40000		
Registered Agent Name/Address			
STEVEN R. LEWIS			
624 NORTH MAYSVILLE STREET			
MT. STERLING, KY 40353			
Members/Managers			
Manager	RON PHILLI HANDSH	10E 624 NORTH MAYSVILLE AVE MT S	TERLING, KY 40353
Manager	STEVE LEWIS	624 NORTH MAYSVILLE AVE MT S	STERLING, KY 40353
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Signatures		VIDE SE AND	
Signature	STEVE L	EWIS 50 WE	
Title	OWNER	1000 1000 /	
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