

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	213508510				
1.) CORPORATION NAME: <b>PIEDMONT PHYSICAL THERAPY, INC.</b>		DUE DATE: <b>4/30/2013</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>DAVID E EBBECKE 8705 STONEWALL RD MANASSAS, VA 20110</b>		SCC ID NO: <b>07077530</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>MANASSAS CITY (FILED IN PRINCE WILLIAM COUNTY)</b>		5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>100</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	100
CLASS	AUTHORIZED					
COMMON	100					
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>						
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 8705 STONEWALL ROAD  CITY/ST/ZIP: MANASSAS, VA 20110						
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.						
NAME: DAVID E EBBECKE TITLE: PRESIDENT ADDRESS: 4215 LONGHORN TRAIL CITY/ST/ZIP/CO: BEALETON, VA 22712		<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR				
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
/s/ DAVID E EBBECKE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DAVID E EBBECKE, PRESIDENT PRINTED NAME AND CORPORATE TITLE	2/20/2013 DATE				
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.						