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Grant, Konvalinka & Harrison

A PROFESSIONAL CORPORATION

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September 18, 2002

Steven W. Grant David E. Harrison David C. Higney John P. Konvalinka Susan K. Lee J. Scott McDearman Jim K. Petty* Donald W. Strickland Rebekah H. Whitaker

*Of Counsel

*****35.00 *****35.00

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Fuller Rehabilitation and Consulting Services, Inc.

To Whom It May Concern:

Enclosed please find a check in the amount of \$35.00 for filing fees along with the completed Statement of Change of Registered Office or Registered Agent or Both for Corporations Form. If you have any questions, please do not hesitate to contact us.

Very truly yours,

Angela M. Schaefer

ams

John R. Anderson

Julian B. Bell III

Harry R. Cash

David M. Elliott

Scott H. Grant

Stephen R. Beckham

Maurice R. Bowen, Jr.*

Mathew D. Brownfield

J. Wayne Cropp, PLLC*

Charles G. Fisher VI H. Wayne Grant

Enclosures

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Georgia in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Fuller Rehabilitation Consulting Services, Inc.	
2. The principal office address: 37 Hidden Trace Drive	
Ringgold, Georgia 30736 3. The mailing address (if different): P. O. Box 615 Ringgold, Georgia 30736 4. Date of incorporation/qualification: 8/17/2001 Document number: F01000004441	1= 7
4. Date of incorporation/qualification: 8/17/2001 Document number: F01000004441	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Jeff West	
3. The name and street address of the new registered agent (if changed) and/or registered Soffice (if changed): Michael O'Rourke AAA Suite A Suite	
Ormond Beach, FL 32176 The street address of its registered office and the street address of the business office of its egistered gent, as changed will be identical.	
uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the heard, or the corporation has been notified in writing of the change.	
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete erformance of my duties, and I am familiar with and accept the obligation of my position as egistered agent. Of, if this document is being filed merely to reflect a change in the registered effice address, I hereby confirm that the corporation has been notified in writing of this change.	
(Signature of Registered Agent) (Date)	
(Typed or Printed Name:) (Capacity)	

* * * FILING FEE: \$35.00 * * *