

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000071520

FILED  
Jan 22, 2003  
Secretary of State

Entity Name: TLC REHAB, INC.

## Current Principal Place of Business:

394 N SUNCOAST BLVD  
CRYSTAL RIVER, FL 34429 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 220  
CRYSTAL RIVER, FL 34423 US

## New Mailing Address:

FEI Number: 65-0443469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALDROP, MARK S  
394 N SUNCOAST BLVD  
STE 40  
CRYSTAL RIVER, FL 34429

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WALDROP, DREAMA M  
Address: 11706 W WATERWAY DR  
City-St-Zip: HOMOSASSA, FL 34448

Title: ST ( ) Delete  
Name: MONTGOMERY, JYNETHA  
Address: 4164 NORTH CASA TERRACE  
City-St-Zip: CRYSTAL RIVER, FL

Title: D ( ) Delete  
Name: WALDROP, MARK S  
Address: 11706 W WATERWAY DR  
City-St-Zip: HOMOSASSA, FL 34448

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARK S. WALDROP

D

01/22/2003

Electronic Signature of Signing Officer or Director

Date