

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000055893

FILED  
Apr 24, 2010  
Secretary of State

Entity Name: TAMARAC LIFECARE REHAB, INC.

**Current Principal Place of Business:**

15310 AMBERLY DRIVE  
STE 310  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

15310 AMBERLY DRIVE  
STE 310  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 65-1112194

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROCK, JAMES C  
7065 WESTPOINTE BOULEVARD  
#317  
ORLANDO, FL 32835 US

**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: DP  
Name: PICCIANO, JOHN R  
Address: 15310 AMBERLY DRIVE, STE. #310  
City-St-Zip: TAMPA, FL 33647

Title: DS  
Name: O'SHEA, JAMES  
Address: 15310 AMBERLY DRIVE, STE. #310  
City-St-Zip: TAMPA, FL 33647

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 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 all other like empowered.

SIGNATURE: JOHN R. PICCIANO

DP

04/24/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date