

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700406

FILED  
Mar 26, 2009  
Secretary of State

**Entity Name:** SUNSHINE REHABILITATION CENTER OF INDIAN RIVER COUNTY, INC.

**Current Principal Place of Business:**

1705 17TH AVENUE  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

1705 17TH AVENUE  
VERO BEACH, FL 32960

**New Mailing Address:**

**FEI Number:** 59-0806983

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMPSON, LARRY  
1531 32ND AVE  
VERO BEACH, FL 32960 US

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

WHITNEY, WINNIFRED  
1605 1ST  
STREET  
VERO BEACH, FL 32962 US

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: WINNIFRED WHITNEY

03/26/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WHITNEY, WINIFRED  
Address: 1605 1ST STREET  
City-St-Zip: VERO BEACH, FL 32962

Title: SD ( ) Delete  
Name: MURDOCK, GIB  
Address: 375 21ST ST  
City-St-Zip: VERO BEACH, FL 32962

Title: VPD ( ) Delete  
Name: BRYANT, ANN  
Address: 5402 ECHO PINES CR W  
City-St-Zip: FORT PIERCE, FL 34951

Title: D ( ) Delete  
Name: SADLEK, STEVE  
Address: 862 CAROLINA CIR. SW  
City-St-Zip: VERO BEACH, FL 32962

Title: D ( ) Delete  
Name: SHEERWOOD, ROGER  
Address: 6472 34TH PL  
City-St-Zip: VERO BEACH, FL 32966

Title: TD ( ) Delete  
Name: LIST, EDDIE  
Address: 815 BEACHLAND BLVD  
City-St-Zip: VERO BEACH, FL 32963

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: MURDOCK, GIB  
Address: 375 21ST ST  
City-St-Zip: VERO BEACH, FL 32962

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

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

Title: SD (X) Change ( ) Addition  
Name: GANIO, LISA  
Address: 2065 30TH AVE  
City-St-Zip: VERO BEACH, FL 32960

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WINNIFRED WHITNEY

PRES

03/26/2009

Electronic Signature of Signing Officer or Director

Date