2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752427

FILED Jan 27, 2010 Secretary of State

Entity Name: REHABILITATION FOUNDATION OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

2929 LANGLEY AVE. SUITE 202

PENSACOLA, FL 32504

Current Mailing Address: New Mailing Address:

2929 LANGLEY AVE. SUITE 202 PENSACOLA, FL 32504

FEI Number: 59-2089355 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOWMAN, ROBERT D 2929 LANGLEY AV E SUITE 202 PENSACOLA, FL 32504 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CT

Name: MOCK, JERRY

Address: 2600 TAMBRIDGE CIRCLE City-St-Zip: PENSACOLA, FL 32503

Title:

 Name:
 HART, ANNE D

 Address:
 4575 FRANCISCO RD

 City-St-Zip:
 PENSACOLA, FL 32504

Title: □

Name: GROSS, JOHN

Address: 125 WEST ROMANA ST. SUITE 224

City-St-Zip: PENSACOLA, FL 32502

Title: T

Name: BELL, BRIAN

Address: 33 WEST GARDEN STREET City-St-Zip: PENSACOLA, FL 32502

Title:

Name: BOWMAN, ROBERT
Address: 305 BERRYHILL ROAD
City-St-Zip: MILTON, FL 32570

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT D. BOWMAN, ED., D. DIR 01/27/2010