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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jennifer.shank@cigna.com

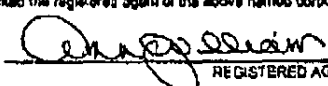
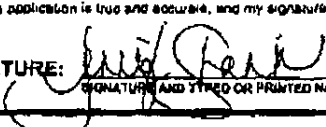
**CORPORATION REINSTATEMENT
INTERNATIONAL REHABILITATION ASSOCIATES, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$1,050.00

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 23 PM 12 38

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 837744			
1. Corporation Name International Rehabilitation Associates, Inc.			
2. Principal Office Address - No P.O. Box # 1601 Chestnut Street TL 16F Suite Apt #, etc.		3. Mailing Office Address 1601 Chestnut Street TL 16F Suite Apt #, etc.	
City & State Philadelphia, PA		City & State Philadelphia, PA	
Zip 19182	Country USA	Zip 19182	Country USA
4. Date incorporated or Qualified To Do Business in Florida 01/24/1977			
5. FEI Number 231728483		Applied for Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐ 975 Additional fee required for a Certificate of Status			
☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.			
7. Name and Address of Current Registered Agent			
Name CT Corporation System			
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road			
Suite Apt #, Etc.			
City Plantation		State FL	Zip Code 33324
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0606 or 617.0503 F.S.			
Signature of Registered Agent 		Date 12/23/09	
Assistant Vice President REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	Please see the attached list		
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617 F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by this corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: 		Jennifer A. Snank, Asst. Secretary 12/1/2009 215-761-6244	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

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Corporate Profile System

INTERNATIONAL REHABILITATION ASSOCIATES, INC.

389

ADDRESS:

1601 CHESTNUT STREET
PHILADELPHIA
PA 19192

TELEPHONE:

215.761.1000

OWNERSHIP: CONNECTICUT GENERAL CORPORATION - 100%

DIRECTORS

✓ THOMAS M. FARRELL
✓ DAVID GOLDBERG

✓ THOMAS M. FARRELL
✓ KEITH A. DIXON
DAVID P. BOURDON
RICHARD C. FERRARO
JOHN P. FREY

SUSAN E. GACA
BETHANY H. JONES
SCOTT R. LAMBERT

✓ WILLIAM A. MCGEAN
✓ BARRY R. MCHALE

ANTHONY PEREZ
DAVID M. PORCELLO
MICHAEL J. REARDON, M.D.
NANCY E. RICHMOND
STEPHEN T. BRADY
PERCY W. CHRISTIAN, JR.
THOMAS P. CICHON
CHRISTOPHER E. COLBORN
JOSEPH M. DOUGHERTY
BRYAN J. LAHMAN
KAREN A. VLASACH
SHERMONA MAPP
✓ DAVID GOLDBERG
SCOTT T. JOSEPHS, M.D.
MICHAEL J. WAGNER
MATTHEW M. ALLYN
SUSAN CELMER
KAREN R. HAMILTON
KEVIN J. OLEKSAK
TITUS . RODEN
✓ JENNIFER A. SHANK
THERESA PRESS
MAUREEN H. RYAN

OFFICERS

PRESIDENT
SENIOR VICE PRESIDENT
VICE PRESIDENT
VICE PRESIDENT
VICE PRESIDENT
VICE PRESIDENT
ASSISTANT TREASURER
VICE PRESIDENT
VICE PRESIDENT
VICE PRESIDENT
TREASURER
VICE PRESIDENT
VICE PRESIDENT
ASSISTANT TREASURER
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ASSISTANT VICE PRESIDENT
ASSISTANT VICE PRESIDENT
DIRECTOR
CORPORATE SECRETARY
CHIEF FINANCIAL OFFICER
CHIEF MEDICAL OFFICER
ASSISTANT CORPORATE SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT SECRETARY
ASSISTANT TREASURER
ASSISTANT TREASURER