

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004805

FILED
Feb 14, 2006
Secretary of State

Entity Name: PARAGON REHABILITATION OF TENNESSEE, INC.

Current Principal Place of Business:

150 2ND AVE NORTH
SUITE 340
NASHVILLE, TN 37201

New Principal Place of Business:

Current Mailing Address:

150 2ND AVE NORTH,
SUITE 340
NASHVILLE, TN 37201

New Mailing Address:

FEI Number: 47-0884386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: DPS () Delete
Name: LEPLEY, LAWRENCE JR
Address: 150 2ND AVE NORTH, SUITE 340
City-St-Zip: NASHVILLE, TN 37201

Title: VP () Delete
Name: BOERKOEL, DAVE OPER
Address: 150 2ND AVE NORTH, SUITE 340
City-St-Zip: NASHVILLE, TN 37201

Title: VP () Delete
Name: THOMPSON, LEIGH ANN FINANCE
Address: 150 2ND AVE NORTH, SUITE 340
City-St-Zip: NASHVILLE, TN 37201

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

SIGNATURE: LEIGH ANN THOMPSON

VP

02/14/2006

Electronic Signature of Signing Officer or Director

Date