FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F58980** **(6)**

1. Corporation Name
VAN PELT & ASSOCIATES PHYSICAL REHABILITATION SERVICES, INC.

Principal Place of Business	Mailing Address
1874 WEST HILLSBORO BLVD. DEERFIELD BEACH FL 33442	1874 WEST HILLSBORO BLVD. DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
12/18/1981	07/13/1994

2. Principal Place of Business	2a. Mailing Address
21 1868-D W Hillsboro Blvd	26 1868-D W Hillsboro Blvd
Suite Apt. # etc. 22	Suite Apt. # etc. 27
City & State 23 Deerfield Beach, FL	City & State 28 Deerfield Beach FL
Zip 24 33442 County 25 USA	Zip 29 33442 County 30 USA

4. FEI Number **59-2152661** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation is liable for intangible tax under S. 199.032 Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PELT, DANA V **2255 GLADES ROAD** **SUITE 232W** **BOCA RATON FL 33431**	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.325, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD NAME PELT, DANA V STREET ADDRESS 2255 GLADES ROAD, SUITE 232W CITY-ST-ZIP BOCA RATON FL 33431	☐ Change ☐ Addition
TITLE D NAME CARLINO, LAWRENCE STREET ADDRESS 2255 GLADES ROAD, SUITE 232W CITY-ST-ZIP BOCA RATON FL 33431	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 12 or Block 13 above or on an attachment with an address.

SIGNATURE: Dana Van Pelt President 5/1/95 (407)998-3400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — TELEPHONE NUMBER

0288703 CP