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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 PIVISION OF DOCUMENT # F95000001738 (2)

CORDOVA REHAB, INC.

FILED Feb 17 1998 8:00am Secretary of State

Principal Place		Mailing Address				
125 W. ROMANA STREET SUITE 400 PENSACOLA FL 32501		125 W ROMANA ST Suite 400 Pensacola Fl 32501		İ		
				DO NOT WRITE IN THIS SPACE		
US	- vervi	US		3. Date Incorporated or Qualified		
				04/11/1995		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3248509	Not Applicable	
Suite, Apt. 6	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			Fee Required	
City & State	•	City & State		6. Election Campaign Financing	\$5.00 May Be	
Z ip	Country	7 _{IP}	Country	Trust Fund Contribution	Added to Fees	
24	25	29	30	This corporation owes or has per Personal Property Tax due June		
L-9 [9. Name and Address of Curren		1201	10. Name and Address of New Re		
CT	CORPORATION SYSTEM		81 Name			
	O SOUTH PINE ISLAND ROAD		62 Street Add	drong (P.O. Poy Niverbor in Not Account	plo)	
	NTATION FL 33324		BZ Street Add	dress (P.O. Box Number is Not Acceptat	olej	
			83			
			84 City		65 Zip Code	
11. Pursuant 1	o the provisions of Sections 607.050	2 and 607,1508, Florida Statu	utes, the above-named cor	rporation submits this statement for the p	ourpose of changing its registered	
office or re	pointered agent or both in the Chute	of Florida, Such change was	authorized by the corpora	ation's board of directors. I hereby accer	pt the appointment as registered	
anent lar	sylamica agent, or poin, in the sinte	alone of Section 607 0505 F	Jorida Statutae	,,		
agent. I ar	m familiar with, and accept the obliga-	alions of, Section 607.0505, F	lorida Statutes.			
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14. Thereby certify that the information supplied with this fining cools for quality for the exemption stated in Section 119.07(5)(), Florida Statutes. Former Certify that the information indicated on this annual report or suppliemental enjoyate 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 if changed, open an attachment with an address.

SIGNATURE: