2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004
Secretary of State

DOCUMENT# G65179

Entity Name: ASSOCIATED REHABILITATION CLINIC, INC.

Current Principal Place of Business:

2032 SOUTHSIDE BLVD
STE 4
JACKSONVILLE, FL 32216

New Principal Place of Business:

3740 ST. JOHNS BLUFF RD
STE 10
JACKSONVILLE, FL 32224

Current Mailing Address:

2032 SOUTHSIDE BLVD
STE 4
JACKSONVILLE, FL 32216

New Mailing Address:

3740 ST. JOHNS BLUFF RD
STE 10
JACKSONVILLE, FL 32224

FEI Number: 59-2334843 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALBERT, JERRY G
C/O 1415 BIG TREE ROAD
NEPTUNE BEACH, FL 32266 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: ALBERT, JERRY,
Address: 1415 816 TREE RD
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: JERRY G. ALBERT PRES 05/03/2004

Electronic Signature of Signing Officer or Director Date