

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G80699

FILED
Apr 01, 2008
Secretary of State

Entity Name: DADE PHYSICAL THERAPY REHAB, INC.

Current Principal Place of Business:

7800 SW 87TH AVENUE, SUITE B205
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 380546
BIRMINGHAM, AL 35243 US

New Mailing Address:

4714 GETTYSBURG ROAD
LEGAL DEPARTMENT
MECHANICSBURG, PA 17055 US

FEI Number: 59-2394368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: CPD () Delete
Name: GRINNEY, JAY
Address: ONE HEALTHSOUTH PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: VSD () Delete
Name: WHITTINGTON, JOHM P
Address: ONE HEALTHSOUTH PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: VT () Delete
Name: WORKMAN, JOHN
Address: ONE HEALTHSOUTH PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: AS () Delete
Name: MARTIN, JODY
Address: ONE HEALTHSOUTH PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

Title: V () Delete
Name: MCANDREWS, JAMES P III
Address: ONE HEALTHSOUTH PKWY
City-St-Zip: BIRMINGHAM, AL 35243

Title: VD (X) Delete
Name: SNOW, MICHAEL D
Address: ONE HEALTHSOUTH PARKWAY
City-St-Zip: BIRMINGHAM, AL 35243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change () Addition
Name: ORTENZIO, ROCCO A
Address: 4714 GETTYSBURG ROAD
City-St-Zip: MECHANICSBURG, PA 17055

Title: VPS (X) Change () Addition
Name: TARVIN, MICHAEL E
Address: 4714 GETTYSBURG ROAD
City-St-Zip: MECHANICSBURG, PA 17055

Title: CP (X) Change () Addition
Name: ORTENZIO, ROBERT A
Address: 4714 GETTYSBURG ROAD
City-St-Zip: MECHANICSBURG, PA 17055

Title: VPAS (X) Change () Addition
Name: RICE, PATRICIA A
Address: 4714 GETTYSBURG ROAD
City-St-Zip: MECHANICSBURG, PA 17055

Title: VP (X) Change () Addition
Name: DUGGAN, JOHN F
Address: 4714 GETTYSBURG ROAD
City-St-Zip: MECHANICSBURG, PA 17055

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN F DUGGAN

VP

04/01/2008

Electronic Signature of Signing Officer or Director

_____ Date