

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K03710

**FILED**  
**Apr 05, 2005**  
**Secretary of State**

**Entity Name:** STOFF REHABILITATION SERVICES, INC.

**Current Principal Place of Business:**

2801 SE MARTIN SQUARE CORP PKWY  
STUART, FL 349944916 US

**New Principal Place of Business:**

**Current Mailing Address:**

2801 SE MARTIN SQUARE CORP PKWY  
STUART, FL 349944916 US

**New Mailing Address:**

FEI Number: 65-0012917

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STOFF, MARK DAVID PT  
2801 SE MARTIN SQUARE CORP PKWY  
STUART, FL 349944916 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: PTD ( ) Delete  
Name: STOFF, MARK DAVID PT,  
Address: 2801 SE MARTIN SQUARE COPR PKWY  
City-St-Zip: STUART, FL 349944916

Title: VS ( ) Delete  
Name: CANDELA, JOSEPH P  
Address: 2801 SE MARTIN SQUARE CORP PKWY  
City-St-Zip: STUART, FL 349944916

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: JOSEPH P. CANDELA

VP

04/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date