

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L04122

FILED  
Apr 28, 2005  
Secretary of State

**Entity Name:** NORTH FLORIDA REHABILITATION, INC.

**Current Principal Place of Business:**

404 NW HALL OF FAME DR  
LAKE CITY, FL 32055 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2134  
LAKE CITY, FL 32056 US

**New Mailing Address:**

**FEI Number:** 59-2957728

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OAKES, JANET S.  
594 NW HORIZON ST  
LAKE CITY, FL 32055 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: DPT ( ) Delete  
Name: OAKES, JANET S.,  
Address: 594 NW HORIZON ST  
City-St-Zip: LAKE CITY, FL 32055

Title: DVS ( ) Delete  
Name: YAXLEY, CHRISTINE J  
Address: RT 9 BOX 2051  
City-St-Zip: LAKE CITY, FL 32024

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

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

Title: DVS (X) Change ( ) Addition  
Name: YAXLEY, CHRISTINE J  
Address: 818 SW BISHOP RD  
City-St-Zip: LAKE CITY, FL 32024

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:** JANET S. OAKES

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

Date