

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M32919

FILED
Jan 06, 2006
Secretary of State

Entity Name: COASTAL REHABILITATION SERVICES, INC.

Current Principal Place of Business:

1717 N. FLAGLER DR.
SUITE # 8
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

2549 KITTBUCK WAY
WEST PALM BEACH, FL 33411 US

New Mailing Address:

1717 N. FLAGLER DR.,
SUITE # 8
WEST PALM BEACH, FL 33407 US

FEI Number: 59-2705377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCELLE, MILLER M
2549 KITTBUCK WAY
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

MARCELLE, MILLER M
1717 N. FLAGLER DR.,
SUITE # 8
WEST PALM BEACH, FL 33407 US

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: MARCELLE M. MILLER

01/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILLER, PADGETT JR
Address: 1717 N. FLAGLER DR. STE 8
City-St-Zip: WEST PALM BEACH, FL 33407

Title: SD () Delete
Name: MILLER, MARCELLE MJ
Address: 1717 N. FLAGLER DR. STE 8
City-St-Zip: WEST PALM BEACH, FL 33407

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 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: MARCELLE M. MILLER

SD

01/06/2006

Electronic Signature of Signing Officer or Director

Date