2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2007
Secretary of State

DOCUMENT# N02000002894

Entity Name: FLORIDA HOPE AND REHABILITATION CENTER, INC.

Current Principal Place of Business:

16805 US HWY 19 N
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

16805 US HWY 19 N
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 55-0789935 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LITTLE, THOMAS C ESQ
2123 NE COACHMAN ROAD STE A
CLEARWATER, FL 33765 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GIORGIONE, DAVID
Address: 16805 US 19 N
City-St-Zip: CLEARWATER, FL 33764

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID GIORGIONE PRES 05/17/2007

Electronic Signature of Signing Officer or Director Date