

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003386

FILED
Jan 07, 2010
Secretary of State

Entity Name: VOCATIONAL REHABILITATION BY NORA INC.

Current Principal Place of Business:

5227 POND VIEW CT.
ZEPHYRHILLS, FL 33541

New Principal Place of Business:

Current Mailing Address:

5227 POND VIEW CT.
ZEPHYRHILLS, FL 33541

New Mailing Address:

FEI Number: 45-0593442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, NORA
5227 POND VIEW CT.
ZEPHYRHILLS, FL 33541 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: PT
Name: WILLIAMS, NORA
Address: 5227 POND VIEW CT.
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S
Name: BROWN, LA DONNA
Address: 5227 POND VIEW CT.
City-St-Zip: ZEPHYRHILLS, FL 33541

I hereby 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 all other like empowered.

SIGNATURE: NORA WILLIAMS

PT

01/07/2010

Electronic Signature of Signing Officer or Director

Date