

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008459

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: OCEAN REHAB INITIATIVE, INC.

**Current Principal Place of Business:**

301 CLEMATIS ST., STE 3000  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

301 CLEMATIS ST., STE 3000  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number: 27-0880501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DJUBIN, WILLIAM R  
301 CLEMATIS ST., STE 3000  
WEST PALM BEACH, FL 33401 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  
Name: DJUBIN, WILLIAM R  
Address: 6046 LESLIE ST.  
City-St-Zip: JUPITER, FL 33458

Title: D  
Name: READLING, MIKE J  
Address: 150 SW CABANA POINT CIRCLE #1  
City-St-Zip: STUART, FL 34994

Title: D  
Name: TOUGAS, MELISSA T  
Address: 7901 NORTH BLVD.  
City-St-Zip: FT. PIERCE, FL 34951

Title: D  
Name: ORDWAY, NIKOLE  
Address: 4085 PINELLA CIRCLE APT 530  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: WILLIAM DJUBIN

PRES

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date