FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT #

N09042

(5)

FILED Mar 03 1998 8:00am Secretary of State

1. Corporation	H CENTRAL FLORIDA REHA	AB, INC.		
Principal Place of Business Mailing Address				T STREAM OF A BASIN BESIN DESIN DIGIT OF THE OFFICE OF THE
4300 NW 89 B GAINESVILLE I US		4300 NW 89 BLVD Gainesville FL 32606 US		3. Date incorporated or Qualified 05/02/1985
				4. FEI Number Applied For Not Applied For Not Applied For
2. Principal Place of Business 21		2a. Mailing Address 26		Certificate of Status Desired
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Stat	le	City & State		7. Is this nonprofit corporation a homeowners association?
Zip	Country	28 Zip	Country	Yes X No 8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Curren	29 It Registered Agent	30	Personal Property Tax due June 30. X Yes No 10. Name and Address of New Registered Agent
DEMON	THAILIN ATPAIRN I		61 Name	
DEMONTMOLLIN, STEPHEN J. 4300 NW 89 BLVD			B2 Street A	Address (P.O. Box Number is Not Acceptable)
GAINESVILLE FL 32606			83	
			84 City	FL 85 Zip Code
11. Pursuant office or ragent. I a				corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
12.	Signature, typed or printed name of registered age OFFICERS ANI		E: Registered Agent signature :	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DC	DELETE	1.1 TITLE	☐ Change ☐ Addillon
NAME	CARR, GLENA		1.2 NAME	
STREET ADDRESS	4300 NW 89 BLVD Gainesville Fl		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	DVC	DELETE	1.4 CITY - ST - ZIP 2 1 TITLE	☐ Change ☐ Addition
NAME	MOUNGER, WILLIAM		2.2 NAME	Crange xoution
STREET ADDRESS	4300 NW 89 BLVD		2.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32606		2. 4 CiTY-ST-ZIP	
TITLE	DS	K K DETELE	3.1 TITLE	DS KPChange Addition
NAME	BENNETT, EDWIN		3.2 NAME	Bullard, Audrey
STREET ADDRESS	4300 NW 89 BLVD		3.3 STREET ADDRESS	4300 NW 89 B1vd.
CITY-ST-ZIP	GAINESVILLE FL 32606		3.4 CITY-ST-ZIP	Gainesville, FL 32606
TITLE	PEODIE EDWARD C	☐ D€L€TE	4.1 TITLE	Change Addition
NAME	PEDDIE, EDWARD C.		4. 2 NAME	
STREET ADDRESS	4300 NW 89 BLVD Gainesville FL 32606		4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	DT DT	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME	DINKINS, ARNOLD		5.2 NAME	
STREET ADDRESS	4300 NW 89 BLVD		5.2 NAME 5.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32606		5.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	BULLARD, AUDREY	<u> </u>	6.2 NAME	
STREET ADDRESS	4300 NW 89 BLVD		6.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32606		6.4 CITY- ST-7IP	
14. I hereby o	certify that the information supplied wi	th this filing does not qualify fo	or the exemption stated	In Section 119.07(3)(i), Florida Statutes. I further certify that the Information

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

and Muchy

2116198

852.887.8769

North Central Florida Rehab, Inc. Corporation # N09042 (Addendum to 1998 Corporation Annual Report)

- D Daniels, Al 4300 NW 89 Blvd., Gainesville, FL 32606
- D French, Royal 4300 NW 89 Blvd., Gainesville, FL 32606
- D Martsolf, Mary 4300 NW 89 Blvd., Gainesville, FL 32606
- D Nell, Cathy 4300 NW 89 Blvd, Gainesville, FL 32606
- D Townsend, Wallace 4300 NW 89 Blvd., Gainesville, FL 32606

Asst Secretary Hughey, Philp J., 4300 NW 89 Blvd, Gainesville, FL 32606