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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000002814

1. Corporation Name
COMMUNITY REHABILITATION CENTER, INC.

Principal Place of Business 7240 LEM TURNER RD. JACKSONVILLE FL 32208	Mailing Address P. O. BOX 9243 JACKSONVILLE FL 32208
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2. Principal Place of Business 21 623 Beechwood Street	2a. Mailing Address 26	3. Date Incorporated or Qualified 06/17/1993
Suite, Apt. #: etc. 22	Suite, Apt. #: etc. 27	4. FEI Number 59-3198739
City & State 23 Jacksonville, Florida	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24 32206	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

BIVENS, BURNEY
1543 KINGSLEY AVE
#18B
ORANGE PARK FL 32073

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	BOWENS, PAULETTE
STREET ADDRESS	7240 LEM TURNER RD
CITY-ST-ZIP	JACKSONVILLE FL 32209
TITLE	D <input type="checkbox"/> DELETE
NAME	TWIGGS, STANLEY
STREET ADDRESS	7240 LEM TURNER RD
CITY-ST-ZIP	JACKSONVILLE FL 32209
TITLE	D <input type="checkbox"/> DELETE
NAME	GAFFNEY, REGINALD
STREET ADDRESS	7240 LEM TURNER RD
CITY-ST-ZIP	JACKSONVILLE FL 32209
TITLE	T <input type="checkbox"/> DELETE
NAME	BROWN, MICHAEL A
STREET ADDRESS	822 ASHLEY ST
CITY-ST-ZIP	JACKSONVILLE FL 32202
TITLE	T <input type="checkbox"/> DELETE
NAME	JONES, RODNEY
STREET ADDRESS	1741 GALLIHADION COURT
CITY-ST-ZIP	JACKSONVILLE FL 32218
TITLE	T <input type="checkbox"/> DELETE
NAME	FLOYD-PEOPLES, BONNIE
STREET ADDRESS	1719 DAYTONA LANE
CITY-ST-ZIP	JACKSONVILLE FL 32218

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Mr. Roy McIntyre
4.3 STREET ADDRESS	Board Member President
4.4 CITY-ST-ZIP	7440 Kylan Drive West
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 as an attachment with an address, with all other like empowered.

SIGNATURE: *Reginald Gaffney* **SIGNATURE REQUIRED** 3/12/99 Date Daytime Phone #

CR2E037 (11/98)