

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90321 007 ***150.00

DOCUMENT # P00000069971

1. Entity Name
ORTHOPAEDIC REHABILITATION INSTITUTE OF
FLORIDA, INC.



Principal Place of Business
1420 SOUTH FEDERAL HIGHWAY
HOLLYWOOD, FL 33020

Mailing Address
1420 SOUTH FEDERAL HIGHWAY
HOLLYWOOD, FL 33020

30039268



DO NOT WRITE IN THIS SPACE

03162005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1034396	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

LANGONE, MICHAEL A MD
1420 SOUTH FEDERAL HIGHWAY
HOLLYWOOD, FL 33020

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Michael A. Langone

4-8-05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPTS
NAME	LANGONE, MICHAEL A MD
STREET ADDRESS	1420 SOUTH FEDERAL HWY
CITY - ST - ZIP	HOLLYWOOD, FL 33020

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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NAME	
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CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.