2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089453

Entity Name: CERTIFIED REHABILITATION CENTER OF FLORIDA, INC.

FILED May 19, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1650 LYNDON FARMS COURT 1650 LYNDON FARM CT., STE 201 SUITE 201 LOUISVILLE, KY 40223

LOUISVILLE, KY 40223

Current Mailing Address: New Mailing Address:

1650 LYNDON FARMS COURT 1650 LYNDON FARM CT., STE 201 LOUISVILLE, KY 40223

LOUISVILLE, KY 40223

FEI Number: 58-2574317 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. () Delete Title: AS (X) Change () Addition

 Name:
 LEPLEY, LAWRENCE W JR
 Name:
 BARNEY, LEIGH ANN

 Address:
 150 2ND AVE N, SUITE 340
 Address:
 1650 LYNDON FARM CT., STE 201

 City-St-Zip:
 NASHVILLE, TN 37201 US
 City-St-Zip:
 LOUISVILLE, KY 40223 US

 Title:
 MR. () Delete
 Title:
 PC (X) Change () Addition

Name: BOERKOEL, DAVID Name: BUFFORD, DAVID

 Address:
 150 2ND AVE N, SUITE 340
 Address:
 1650 LYNDON FARM CT., STE 201

 City-St-Zip:
 NASHVILLE, TN 37201 US
 City-St-Zip:
 LOUISVILLE, KY 40223 US

Title: MS. () Delete Title: VPSC (X) Change () Addition Name: THOMPSON, LEIGH A Name: VAN CAMP, STEVEN A

Address: 150 2ND AVE N, SUITE 340 Address: 1650 LYNDON FARM CT., STE 201

City-St-Zip: NASHVILLE, TN 37201 US City-St-Zip: LOUISVILLE, KY 40223 US

 Title:
 () Delete
 Title:
 VPC () Change (X) Addition

 Name:
 Name:
 CALDWELL, PHILLIP A

 Address:
 Address:
 1650 LYNDON FARM CT., STE 201

 City-St-Zip:
 City-St-Zip:
 LOUISVILLE, KY 40223 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNE MEYER POA 05/19/2009