2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2011
Secretary of State

DOCUMENT# P01000113128

Entity Name: EASTCOAST REHABILITATION CENTER'S,INC.

Current Principal Place of Business:

318 SOUTH STATE RD 7
MARGATE, FL 33068

New Principal Place of Business:

Current Mailing Address:

110 29TH AVENUE NORTH
SUITE 300
NASHVILLE, TN 37203

New Mailing Address:

FEI Number: 03-0447411 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DULUC, LUIS M
16250 LACOSTA DRIVE
WESTIN, FL 33326 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: PRES
Name: DULUC, LUIS M
Address: 110 29TH AVENUE NORTH, SUITE 300
City-St-Zip: NASHVILLE, TN 37203

Title: VP
Name: DULUC, LUIS M
Address: 110 29TH AVENUE NORTH, SUITE 300
City-St-Zip: NASHVILLE, TN 37203

Title: TREA
Name: DULUC, LUIS M
Address: 110 29TH AVENUE NORTH, SUITE 300
City-St-Zip: NASHVILLE, TN 37203

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUIS M DULUC PRES 03/22/2011

Electronic Signature of Signing Officer or Director Date