## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000052005

Entity Name: SILVER HILLS HEALTH & REHAB CLINIC INC

**FILED** Feb 12, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

4823 SILVER STAR RD., SUITE 130 ORLANDO, FL 32808

**Current Mailing Address: New Mailing Address:** 

4823 SILVER STAR RD., SUITE 130 ORLANDO, FL 32808

FEI Number: 20-0020183 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:

WESLEY, ALTENOR ALTENOR, WESLEY 4823 SILVER STAR RD., SUITE 130

4823 SILVER STAR RD., SUITE 130 ORLANDO, FL 32808 ORLANDO, FL 32808

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: WESLEY ALTENOR 02/12/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

ALTENOR, WESLEY ALTENOR, WESLEY Name: Name:

4823 SILVER STAR RD., SUITE 130 4823 SILVER STAR RD., SUITE 130 Address: Address:

City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32808

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

Name: ALTENOR, WILKEN Name: ALTENOR, WILKEN

4823 SILVER STAR RD., SUITE 130 4823 SILVER STAR RD., SUITE 130 Address: Address:

ORLANDO, FL 32808 City-St-Zip: City-St-Zip: ORLANDO, FL 32808

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

ALTENOR, WETZER ALTENOR, WETZER Name: Name:

4823 SILVER STAR RD., SUITE 130 4823 SILVER STAR RD., SUITE 130 Address: Address:

City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32808

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

JEAN, SAMUEL Name: Name:

Address: Address: 4823 SILVER STAR RD., SUITE 130

City-St-Zip: City-St-Zip: ORLANDO, FL 32808 FL

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

ALTENOR, HERNA Name: Name:

Address: Address: 4823 SILVER STAR RD., SUITE 130

City-St-Zip: City-St-Zip: ORLANDO, FL 32808 FL

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: WETZER ALTENOR D 02/12/2008

Electronic Signature of Signing Officer or Director

Date