

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
May 01, 2011
Secretary of State

Entity Name: UNITED HEALTH & REHAB ASSOCIATES OF FLORIDA INCORPORATED

Current Principal Place of Business:

885 NORTH POWERS DRIVE
SUITE A
ORLANDO, FL 32818 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 585707
ORLANDO, FL 32858 US

New Mailing Address:

P.O BOX 585705
ORLANDO, FL 32858 US

FEI Number: 30-0190307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARLSON, ROY P DC
531 S GROVE STREET
EUSTIS, FL 32726 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: P
Name: CARLSON, ROY P DC
Address: 531 S GROVE STREET
City-St-Zip: EUSTIS, FL 32726 US

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: ROY CARLSON P

P

05/01/2011

Electronic Signature of Signing Officer or Director

Date