2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 30, 2009
Secretary of State

DOCUMENT# P03000100029

Entity Name: ADVANCED REHABILITATION, INC.

Current Principal Place of Business:

2907 W. BAY TO BAY BLVD
STE 100
TAMPA, FL 33629 US

New Principal Place of Business:

Current Mailing Address:

2907 W. BAY TO BAY BLVD
STE 100
TAMPA, FL 33629 US

New Mailing Address:

FEI Number: 83-0373416 **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:

ARRIGO, CHRISTOPHER A
2907 W. BAY TO BAY BLVD
100
TAMPA, FL 33629 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: CHRISTOPHER A. ARRIGO 07/30/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ARRIGO, CHRISTOPHER
Address: 2111 W SWANN AVE STE 100
City-St-Zip: TAMPA, FL 33606

Title: VD ( ) Delete
Name: DRAKE, KELLY
Address: 2111 W SWANN AVE STE 100
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CHRISTOPHER A. ARRIGO PD 07/30/2009
Electronic Signature of Signing Officer or Director Date