2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134544

Entity Name: AROUND TOWN REHABILITATION SERVICES, INC.

FILED Mar 31, 2004 Secretary of State

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

426 NORTH 3RD STREET 108 S. 5TH STREET

SUITE 211 SUITE B

LEESBURG, FL 34748 LEESBURG, FL 34748 US

Current Mailing Address: New Mailing Address:

108 S. 5TH STREET 426 NORTH 3RD STREET

SUITE 211 SUITE B

LEESBURG, FL 34748 LEESBURG, FL 34748 US

FEI Number: 01-0801441 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:

BRAZILL, DEBORAH L BUFFENBARGER, LEA A OTR/L 34731 FÓREST LAKE RD 61 ARDLUSSA STREET LEESBURG, FL 34788 UMATILLA, FL 32784

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: LEA A BUFFENBARGER 03/31/2004

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

CLERMONT, FL 34711

TAVARES, FL 32778

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

CLERMONT, FL 34711

TAVARES, FL 32778

Title: () Delete Title: (X) Change () Addition BUFFENBARGER, LEA OTR BUFFENBARGER, LEA OTR/L Name: Name: 61 ARDLUSSA 61 ARDLUSSA STREET Address: Address:

City-St-Zip: UMATILLA, FL 32784 City-St-Zip: UMATILLA, FL 32784

Title: (X) Change () Addition Title: () Delete Name: KYLE, KAREN OTR Name: KYLE, KAREN OTR/L 925 SCENIC CIR 925 SCENIC CIRCLE Address: Address:

Title: Title: (X) Change () Addition () Delete HUNTER, JOCELYN RPT HUNTER, JOCELYN RPT/L Name: Name: 28877 BEECHNUT RD 28877 BEECHNUT ROAD Address: Address: City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change () Addition BRAZILL, DEBORAH NHA MAGNUSON, CAMILLE COTA/L Name: Name:

Address: 34731 FOREST LAKE RD Address: 8648 JUNIPER ROAD City-St-Zip: City-St-Zip: LEESBURG, FL 34788 OCALA, FL 34480

Title: Title: (X) Change () Addition () Delete MAGNUSON, CAMILLE COTA MCGEOCH, CAMERON PTA/L Name: Name: 8648 JUNIPER RD Address: 6655 WEST SEVEN RIVERS DRIVE Address: City-St-Zip: OCALA, FL 34480 City-St-Zip: CRYSTAL RIVER, FL 34429

Title: (X) Delete Title: MCGEOCH, CAMERON PTA Name: Name: 6655 WEST SEVEN RIVERS DR Address: Address: City-St-Zip: CRYSTAL RIVER, FL 34429 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Ρ SIGNATURE: LEA A BUFFENBARGER 03/31/2004