

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000146607

FILED  
Apr 21, 2004  
Secretary of State

Entity Name: GULF SHORE REHABILITATION, INC.

## Current Principal Place of Business:

529 SE 34TH ST  
CAPE CORAL, FL 33904

## New Principal Place of Business:

2709 SWAMP CABBAGE CT,  
SUITE 100  
FORT MYERS, FL 33901

## Current Mailing Address:

529 SE 34TH ST  
CAPE CORAL, FL 33904

## New Mailing Address:

529 SE 34TH STREET  
CAPE CORAL, FL 33904

FEI Number: 20-0466726

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAGIN, JOHN R  
529 SE 34TH ST  
CAPE CORAL, FL 33904

## Name and Address of New Registered Agent:

MAGIN, JOHN R  
2709 SWAMP CABBAGE CT, SUITE 100  
FORT MYERS, FL 33901

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: JOHN R MAGIN

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MAGIN, JOHN R JR.  
Address: 529 SE 34TH ST  
City-St-Zip: CAPE CORAL, FL 33904

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MAGIN, JOHN R JR.  
Address: 2709 SWAMP CABBAGE CT, SUITE 100  
City-St-Zip: FORT MYERS, FL 33901

Title: VP ( ) Change (X) Addition  
Name: MAGIN, JOHN R JR  
Address: 2709 SWAMP CABBAGE CT, SUITE 100  
City-St-Zip: FORT MYERS, FL 33901

Title: SEC ( ) Change (X) Addition  
Name: MAGIN, JOHN R JR  
Address: 2709 SWAMP CABBAGE CT, SUITE 100  
City-St-Zip: FORT MYERS, FL 33901

Title: TR ( ) Change (X) Addition  
Name: MAGIN, JOHN R JR  
Address: 2709 SWAMP CABBAGE CT, SUITE 100  
City-St-Zip: FORT MYERS, FL 33901

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.

SIGNATURE: JOHN R MAGIN, JR

P

04/21/2004

Electronic Signature of Signing Officer or Director

Date