

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000078675

FILED
Aug 28, 2006
Secretary of State

Entity Name: CDL RESIDENTIAL REHAB INC

Current Principal Place of Business:

3433 80TH ST N
ST PETERSBURG, FL 33710 US

New Principal Place of Business:

7901 36TH AVE N
ST PETERSBURG, FL 33710 US

Current Mailing Address:

3433 80TH ST N
ST PETERSBURG, FL 33710 US

New Mailing Address:

7901 36TH AVE N
ST PETERSBURG, FL 33710 US

FEI Number: 20-1125107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMBERT, CHRISTOPHER D
3433 80TH ST N
ST PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

LAMBERT, CHRISTOPHER D
7901 36TH AVE N
ST PETERSBURG, FL 33710 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 D LAMBERT

08/28/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAMBERT, CHRISTOPHER D
Address: 3433 80TH ST N
City-St-Zip: ST PETERSBURG, FL 33710 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAMBERT, CHRISTOPHER D
Address: 790136TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710 US

I hereby certify that the information supplied with this filing does not qualify for the 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 D LAMBERT

PD

08/28/2006

Electronic Signature of Signing Officer or Director

Date