

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136813

FILED  
Apr 08, 2008  
Secretary of State

Entity Name: ABBEY REHABILITATION SPECIALISTS OF LAKE COUNTY INC.

## Current Principal Place of Business:

607 HWY 466  
STE. A  
LADY LAKE, FL 32159 US

## New Principal Place of Business:

## Current Mailing Address:

607 HWY 466  
STE. A  
LADY LAKE, FL 32159 US

## New Mailing Address:

FEI Number: 20-1705158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SWIGERT, BRETT  
1231 COUNTY ROAD 452  
EUSTIS, FL 32726 US

## Name and Address of New Registered Agent:

BLAKEMORE, DONNA J  
607 HWY 466  
A  
LADY LAKE, FL 32159 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: DONNA J BLAKEMORE

04/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTS ( ) Delete  
Name: BLAKEMORE, DONNA J  
Address: PO BOX 67  
City-St-Zip: YALAH, FL 34797 US

Title: PTS ( ) Delete  
Name: BLAKEMORE, DONNA J  
Address: P.O. BOX 67  
City-St-Zip: YALAH, FL 34797

## 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: DONNA J BLAKEMORE

PTS

04/08/2008

Electronic Signature of Signing Officer or Director

Date