

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000069461

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Entity Name:** REGAL REHABILITATION, INC.

**Current Principal Place of Business:**

6226 SW 80TH STREET  
OCALA, FL 34476 US

**New Principal Place of Business:**

**Current Mailing Address:**

6226 SW 80TH STREET  
OCALA, FL 34476 US

**New Mailing Address:**

**FEI Number:** 26-3142060

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MARY ANNE GRAY, P.A.  
216 S. PINE AVENUE  
INVERNESS, FL 34452 US

**Name and Address of New Registered Agent:**

BARBARA & VALERIE'S BOOKKEEPING SERVICES  
11547 SE US HIGHWAY 441  
BELLEVIEW, FL 34420 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:** JAMIE LOSITO

04/01/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** NJUGUNA, JAMES G  
**Address:** 6226 SW 80TH STREET  
**City-St-Zip:** Ocala, FL 34476 US

**Title:** VP  
**Name:** GIOCHE, FLORENCE  
**Address:** 6226 SW 80TH STREET  
**City-St-Zip:** Ocala, FL 34476 US

I hereby 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 all other like empowered.

**SIGNATURE:** JAMES NJUGUNA

PRES

04/01/2011

Electronic Signature of Signing Officer or Director

Date