

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000039530

FILED  
Apr 29, 2011  
Secretary of State

Entity Name: PROGRESSIVE REHAB., INC.

**Current Principal Place of Business:**

8607 VALLEY RIDGE COURT  
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

8607 VALLEY RIDGE COURT  
ORLANDO, FL 32818

**New Mailing Address:**

FEI Number: 80-0404423

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

VERA, GLADYS Y  
8607 VALLEY RIDGE CT.  
ORLANDO, FL 32818 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: VERA, GLADYS Y  
Address: 8607 VALLEY RIDGE CT.  
City-St-Zip: ORLANDO, FL 32818

Title: VP  
Name: ROJAS, HERIBERTO  
Address: 8607 VALLEY RIDGE CT.  
City-St-Zip: ORLANDO, FL 32818

Title: S  
Name: VERA, GLADYS Y  
Address: 8607 VALLEY RIDGE CT.  
City-St-Zip: ORLANDO, FL 32818

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: HERIBERTO ROJAS

VP

04/29/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date