2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

DOCUMENT# P11000051420

Entity Name: NAPLES INJURY AND REHAB, INC

Current Principal Place of Business:

5425 GOLDEN GATE PARKWAY
5
NAPLES, FL 34116

New Principal Place of Business:

Current Mailing Address:

5080 ANNUNCIATION CIRCLE
104
AVE MARIA, FL 34142

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLAN, SCOTT
5080 ANNUNCIATION CIRCLE
104
AVE MARIA, FL 34142 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: ALLAN, SCOTT
Address: 5080 ANNUNCIATION CIRCLE # 104
City-St-Zip: AVE MARIA, FL 34142

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: SCOTT A. ALLAN P 04/27/2012

Electronic Signature of Signing Officer or Director — Date