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FLORIDA PROFIT/NON PROFIT CORPORATION
WEST COLONIAL REHAB CENTER, INC.

Certificate of Status	1
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**ARTICLES OF INCORPORATION
OF**

WEST COLONIAL REHAB CENTER, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME AND ADDRESS

The name and address of the corporation is:

NAME: WEST COLONIAL REHAB CENTER, INC.

PHYSICAL ADDRESS: 1904 W. COLONIAL DRIVE
ORLANDO, FL 32804

MAILING ADDRESS: 1904 W. COLONIAL DRIVE
ORLANDO, FL 32804

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ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1000 shares of (One) Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

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ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agent of this Corporation is:

Name: VICTOR ROSS LOCKLEAR

Address: 1904 W. COLONIAL DRIVE

City: ORLANDO, FL 32804

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) director(S) initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). The name and address of the initial director(s) of the corporation are as follows:

Name: VICTOR ROSS LOCKLEAR

Address: 1904 W. COLONIAL DRIVE

City: ORLANDO, FL 32804

ARTICLE VII - INCORPORATORS

The name and address of the person signing these articles Incorporation are as follows:

Name: VICTOR ROSS LOCHLEAR

Address: 1904 W. COLONIAL DRIVE

City: ORLANDO, FL 32804

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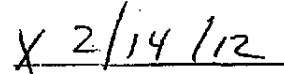
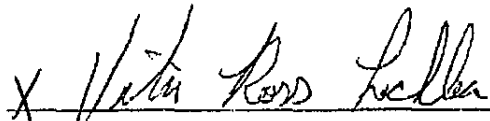
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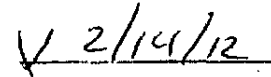
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



VICTOR ROSS LOCKLEAR / Registered Agent


Date

VICTOR ROSS LOCKLEAR / Incorporator


Date

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