

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000064812

FILED
Jan 17, 2005
Secretary of State

Entity Name: DEVELOPMENTAL REHABILITATIVE SERVICES, INC.

Current Principal Place of Business:

9623 SW 53RD RD
GAINESVILLE, FL 33608 US

New Principal Place of Business:

9623 SW 53RD RD
GAINESVILLE, FL 32608 US

Current Mailing Address:

9623 SW 53RD RD
GAINESVILLE, FL 33608 US

New Mailing Address:

9623 SW 53RD RD
GAINESVILLE, FL 32608 US

FEI Number: 59-3212771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUIGLEY, SHARON
9623 S.W. 53RD RD
GAINESVILLE, FL 32608 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: QUIGLEY, SHARON
Address: 9623 SW 53RD ROAD
City-St-Zip: GAINESVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: QUIGLEY, SHARON
Address: 9623 SW 53RD ROAD
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHARON K. QUIGLEY

PD

01/17/2005

Electronic Signature of Signing Officer or Director

Date