

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000006893

Entity Name: ABILITY REHAB SERVICES, INC.

FILED
Feb 03, 2011
Secretary of State

Current Principal Place of Business:

906 SHORE DRIVE
ST AUGUSTINE, FL 32086 US

New Principal Place of Business:

Current Mailing Address:

906 SHORE DR
ST AUGUSTINE, FL 32086 US

New Mailing Address:

906 SHORE DRIVE
ST AUGUSTINE, FL 32086 US

FEI Number: 59-3220985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFS, MATTHEW J
906 SHORE DRIVE
ST AUGUSTINE, FL 32086 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: JEFFS, MATTHEW J
Address: 906 SHORE DR
City-St-Zip: ST AUGUSTINE, FL 32086

Title: ST
Name: JEFFS, KIMBERLY
Address: 906 SHORE DRIVE
City-St-Zip: ST AUGUSTINE, FL 32086

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: MATTHEW J JEFFS

PRES

02/03/2011

Electronic Signature of Signing Officer or Director

Date