FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



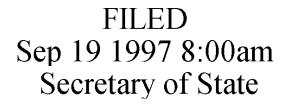
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000081889 (3)

RANAGAN REHAB INC.

Principal Place of Business

Mailing Address





713 A1 SUNNY PINE WAY WEST PALM BEACH FL 33415			713 A1 SUNNY PINE WAY WEST PALM BEACH FL 33415					
					3. Date Incorporated or Qualified 09/30/1996	3a. Date of Last	Report	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	2	Applied For	
21		26			65-07/004	U Tr	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			,		Additional	
22		27			5. Certificate of Status Desired Fee Required			
City & Stat	Θ	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Country Zip Cou						
24	25	<u></u>	 -1	ıı y	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24 25 29 30 30 9. Name and Address of Current Registered Agent			30	10. Name and Address of New Registered Agent				
14011		Helit Hegistered Agent		B1 Name	TO. Name and Address of New Maj	Aistalan Wasiir		
YOUNG, BRENDA M 713 A1 SUNNY PINE WAY								
WEST PALM BEACH FL 33415				82 Street Address (P.O. Box Number is Not Acceptable)				
			[1	33				
			ļī	34 City		FL 85 Zip	Code	
office or r	egistered agent, or both, in the S	0502 and 607.1508, Florida Statutete of Florida. Such change was bligations of, Section 607.0505, F	authorized	by the corpo	orporation submits this statement for the p tration's board of directors. I hereby accep	urpose of changing	its registered is registered	
SIGNATURE								
	Signature, typed or printed name of registere			Agent signature re	quired when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		(
TITLE	D	☐ DELETE	1.9 TITU			Change	[] Acdition	
NAME	YOUNG, BRENDA M	•	1.2 NA	NE			- 13	
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						L Change	L. Addition	
NAME			6.2 NAN				1	
STREET ADDRESS				EET ADDRESS			1	
CITY-ST-ZIP	ay cartify that the information true	plind with this filing slope = -4 ev-		r-ST-ZIP	tod in Costion 110 07/2Vi). Florido Ctatutas	I further english the		

Information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.