

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000086491

Entity Name: NEW LIFE REHAB, INC.

FILED
Sep 30, 2009
Secretary of State

Current Principal Place of Business:

1405 82ND AVENUE
208
VERO BEACH, FL 32966

New Principal Place of Business:

Current Mailing Address:

1405 82ND AVENUE
208
VERO BEACH, FL 32966

New Mailing Address:

FEI Number: 65-0785472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GREGORY, BUDDE
1405 82ND AVENUE
208
VERO BEACH, FL 32966 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: GREGORY BUDDE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUDDE, GREGG
Address: 6566 4TH LANE
City-St-Zip: VERO BEACH, FL 32968

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: OFF () Change (X) Addition
Name: JUDITH, HANSEN A
Address: 1405 82ND AVENUE LOT 208
City-St-Zip: VERO BEACH, FL 32966 IR

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JUDITH A HANSEN

OFF

09/30/2009

Electronic Signature of Signing Officer or Director

Date