

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000019676

FILED
Feb 09, 2006
Secretary of State

Entity Name: ARTHRITIS & REHAB CENTER OF JACKSONVILLE, INC.

Current Principal Place of Business:

2502 & 2510 OAK ST
JACKSONVILLE, FL 32204

New Principal Place of Business:

4131 UNIVERSITY BLVD S
BLDG 3
JACKSONVILLE, FL 32216

Current Mailing Address:

2502 OAK STREET
JACKSONVILLE, FL 32204

New Mailing Address:

PO BOX 55040
JACKSONVILLE, FL 32216

FEI Number: 59-3495410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDDY, A N
2502 OAK STREET
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

REDDY, A N
4131 UNIVERSITY BLVD S
BLDG 3
JACKSONVILLE, FL 32216 US

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:

02/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REDDY, A N
Address: 2502 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REDDY, A N
Address: 4131 UNIVERSITY BLVD S, BLDG 3
City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify for the 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: A.N. REDDY

P

02/09/2006

Electronic Signature of Signing Officer or Director

Date