2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000048956

FILED May 03, 2006 Secretary of State

Entity Name: FUNCTIONAL REHAB CENTER, INC. **Current Principal Place of Business: New Principal Place of Business:** 203 US HIGHWAY 27 SOUTH LAKE PLACID, FL 33852 **Current Mailing Address: New Mailing Address:** 203 US HIGHWAY 27 SOUTH LAKE PLACID, FL 33852 FEI Number: 65-0840053 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ASUMBRADO, ROY G PRESIDE 203 US HWY. 27 NORTH LAKE PLACID, FL 33852 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition ASUMBRADO, ROY G PRESIDE ASUMBRADO, ROY G PRESIDE Name: Name: 203 US HIGHWAY 27 SOUTH 203 US HIGHWAY 27 SOUTH Address: Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852 Title: (X) Delete Title: () Change () Addition Name: GOZO, DEVEY-JUNE T VP-TREA Name: 203 US HIGHWAY 27 SOUTH Address: Address: LAKE PLACID, FL 33852 City-St-Zip: City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SD

(X) Change () Addition

VILLAMOR, NOSTER R SECRETA

203 US HIGHWAY 27 SOUTH

LAKE PLACID, FL 33852

SIGNATURE: ROY ASUMBRADO PTD 05/03/2006

() Delete

VILLAMOR, NOSTER R

LAKE PLACID, FL 33852

203 US HIGHWAY 27 SOUTH

Title:

Name:

Address:

City-St-Zip:

VD