2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2011
Secretary of State

DOCUMENT# P98000079444

Entity Name: REHAB CONSULTANTS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

4040 U.S. HIGHWAY 27 NORTH
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

4040 U.S. HIGHWAY 27 NORTH
SEBRING, FL 33870

New Mailing Address:

FEI Number: 65-0862730 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARMSTRONG, JIM L
4040 U.S. HIGHWAY 27 NORTH
SEBRING, FL 33870 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: PSTD
Name: ARMSTRONG, JIM L
Address: 4040 U.S. HIGHWAY 27 NORTH
City-St-Zip: SEBRING, FL 33870

Title: VPD
Name: PAUZE, RYAN
Address: 4040 US 27 N
City-St-Zip: SEBRING, FL 33870

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: JIM L. ARMSTRONG PSTD 02/21/2011

Electronic Signature of Signing Officer or Director — Date