

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

0004846

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000104045

1. Corporation Name
WASHINGTON SHORES REHAB, INC.

Principal Place of Business
**3300 SOUTH HIAWASSEE ROAD #107
ORLANDO FL 32835**

Mailing Address
**POST OFFICE BOX 4961
ORLANDO FL 32802-4961**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

**B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 NORTH ORANGE AVENUE
SUITE 1100
ORLANDO FL 32801**

81 Name

82 Street Address (P.O. Box Number is **200002817672-3**)

83 **03-28793-01006-012**
*****150.00 ***150.00**

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, type or printed name of registered agent and the filer, if applicable

Date Registered Agent's Signature and Qualification Expiration

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CHIRA, LEE	
STREET ADDRESS	3300 SOUTH HIAWASSEE ROAD #107	
CITY-ST-ZIP	ORLANDO FL 32835	
TITLE	D	<input type="checkbox"/> DELETE
NAME	L. MILLS TUTTLE	
STREET ADDRESS	3300 SOUTH HIAWASSEE ROAD #107	
CITY-ST-ZIP	ORLANDO FL 32835	
TITLE	D	<input type="checkbox"/> DELETE
NAME	E. JOSEPH MCKINNEY	
STREET ADDRESS	3300 SOUTH HIAWASSEE ROAD #107	
CITY-ST-ZIP	ORLANDO FL 32835	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LAWLER, THOMAS P	
STREET ADDRESS	3300 SOUTH HIAWASSEE ROAD #107	
CITY-ST-ZIP	ORLANDO FL 32835	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WILLNER, DAVID M	
STREET ADDRESS	3300 SOUTH HIAWASSEE ROAD #107	
CITY-ST-ZIP	ORLANDO FL 32835	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PEISNER, ERIC	
STREET ADDRESS	3300 SOUTH HIAWASSEE ROAD #107	
CITY-ST-ZIP	ORLANDO FL 32835	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	CEO	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
12 NAME	CHIRA, LEE		
13 STREET ADDRESS	3300 S. HIAWASSEE ROAD, #107		
14 CITY-ST-ZIP	ORLANDO, FL 32835		
21 TITLE	VP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
22 NAME	TUTTLE, L MILLS		
23 STREET ADDRESS	3200 S. HIAWASSEE ROAD #206		
24 CITY-ST-ZIP	ORLANDO, FL 32835		
31 TITLE	VPAS	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
32 NAME	MCKINNEY, E. JOSEPH		
33 STREET ADDRESS	3200 S. HIAWASSEE ROAD #206		
34 CITY-ST-ZIP	ORLANDO, FL 32835		
41 TITLE	VPAT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
42 NAME	LAWLER, THOMAS P.		
43 STREET ADDRESS	3200 S. HIAWASSEE ROAD #206		
44 CITY-ST-ZIP	ORLANDO, FL 32835		
51 TITLE	VPT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
52 NAME	WILLNER, DAVID M.		
53 STREET ADDRESS	3200 S. HIAWASSEE ROAD #206		
54 CITY-ST-ZIP	ORLANDO, FL 32835		
61 TITLE	VP, COMPTROLLER	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
62 NAME	PEISNER, ERIC		
63 STREET ADDRESS	3300 S. HIAWASSEE ROAD #107		
64 CITY-ST-ZIP	ORLANDO, FL 32835		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g) Florida Statutes. I further certify that 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. I am the 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 on Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Eric Peisner VP*
ERIC PEISNER, VICE PRESIDENT

3-8-99 407-297-1600

CR2E034 (11/98)

FILED
MAR 25 11 09:37
STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/14/1998

4. F.I. Number

59-3547024

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax

Yes No

10. Name and Address of New Registered Agent