

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 24, 2000 8:00 am**
Secretary of State

03-24-2000 90079 006 ***150.00

DOCUMENT # P99000090682

1. Entity Name

BARNEGAT REHABILITATIVE SERVICES, INC.

Principal Place of Business

**9810 NICKELS BLVD., NO. 1008
BOYNTON BEACH FL 33436**

Mailing Address

**9810 NICKELS BLVD., NO. 1008
BOYNTON BEACH FL 33436-3981**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0955075

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****WHITMIRE, DRENNEN L JR.
500 S. AUSTRALIAN AVE., CLEARLAKE PLAZA
STE. 500
WEST PALM BEACH FL 33401**

Name

Drennen L. Whitmire, Jr.

Street Address (P.O. Box Number is Not Acceptable)

450 Royal Palm Way, Sixth Floor

City

Palm Beach**FL**Zip Code
33480

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/20/009. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D VOELLINGER, DAVID M 9810 NICKELS BLVD., NO. 1008 BOYNTON BEACH FL 33436	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D KRASNIANSKY, ANDREA P 9810 NICKELS BLVD., NO. 1008 BOYNTON BEACH FL 33436	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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3. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **David M. Voellinger**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID M. VOELLINGER**3/14/2000**

Date

561 369-5006

Daytime Phone #

CR2E034 (9/99)