

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000107570

FILED
Apr 21, 2009
Secretary of State

Entity Name: NATURE COAST REHABILITATION, INC.

Current Principal Place of Business:

P. O. BOX 518
WILLISTON, FL 32696

New Principal Place of Business:

37 SOUTH MAIN ST
SUITE C
WILLISTON, FL 32696

Current Mailing Address:

P. O. BOX 518
WILLISTON, FL 32696

New Mailing Address:

FEI Number: 59-3615428

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKS, ELIZABETH J
506 SW 5TH TERR.
WILLISTON, FL 32696 US

Name and Address of New Registered Agent:

HICKS, ELIZABETH J
37 SOUTH MAIN ST
SUITE C
WILLISTON, FL 32696 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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HICKS, ELIZABETH J
Address: P. O. BOX 518
City-St-Zip: WILLISTON, FL 32696

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ELIZABETH J HICKS

D

04/21/2009

Electronic Signature of Signing Officer or Director

Date