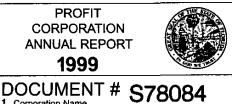
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90098 037 \*\*\*150.00

REHAB CONSULTANTS OF FLORIDA, INC. Mailing Address Principal Place of Business 131 GALILEE CHURCH BLVD. 131 GALILEE CHURCH BLVD. JEFFERSON GA 30549 JEFFERSON GA 30549 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/03/1991 Applied For 2a. Mailing Address 2. Principal Place of Business FEI Number Not Applicable 58-1963475 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Country 8. This corporation owes the current year Intangible ΠNo Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ENGLANDER, LEONARD S 82 Street Address (P.O. Box Number is Not Acceptable) 5959 CENTRAL AVE SUITE 201 83 ST. PETERSBURG FL 33710 Ziò Code 84 City 85 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition □ D€LETE 1.1 TITLE ☐ Change TITLE 12 NAME NAME **GENTZEL, GRAYSON S** 131 GALILEE CHURCH RD 1.3 STREET ADDRESS STREET ADDRESS JEFFERSON GA 30549 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TI DELETE 2.1 TITLE TITLE GENTZEL, JOSEPH B 2.2 NAME NAME 131 GALILEE CHURCH RD. 2.3 STREET ADDRESS STREET ADDRESS JEFFERSON GA 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME

CITY-ST-ZIP 14. 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 annual report or supplied with an animal 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIF

TITLE

NAME

DELETE

CR2E034 (11/98)

Addition

Change