

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S89697

FILED
Apr 09, 2012
Secretary of State

Entity Name: CENTER FOR HAND REHABILITATION, P.A.

Current Principal Place of Business:

1715 EAGLE HARBOR PARKWAY
SUITE A
FLEMING ISLAND, FL 32003 US

New Principal Place of Business:

Current Mailing Address:

1715 EAGLE HARBOR PARKWAY
SUITE A
FLEMING ISLAND, FL 32003 US

New Mailing Address:

FEI Number: 65-0291554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURTIS, ELIZABETH B PRES
1715 EAGLE HARBOR PARKWAY
SUITE 6B
FLEMING ISLAND, FL 32003 US

Name and Address of New Registered Agent:

CURTIS, ELIZABETH B PRES
1715 EAGLE HARBOR PARKWAY
SUITE A
FLEMING ISLAND, FL 32003 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:

Electronic Signature of Registered Agent

04/09/2012

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: CURTIS, ELIZABETH B PRES
Address: 1715 EAGLE HARBOR PARKWAY
City-St-Zip: FLEMING ISLAND, FL 32003 US

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: ELIZABETH B. CURTIS

PRES

04/09/2012

Electronic Signature of Signing Officer or Director

Date