

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S93896

FILED
Apr 25, 2003
Secretary of State

Entity Name: REHAB KITCHENETTES OF THE TREASURE COAST, INC.

Current Principal Place of Business:

1592 S.E. VILLAGE GREEN DRIVE
|
PORT SAINT LUCIE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

7748 BOBCAT RUN
PORT SAINT LUCIE, FL 34952 US

New Mailing Address:

FEI Number: 65-0295325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUKE, ROBERT L.
7748 BOBCAT RUN
PORT SAINT LUCIE, FL 34952

Name and Address of New Registered Agent:

LUKE, ROBERT L PD
7748 BOBCAT RUN
PORT SAINT LUCIE, FL 34952

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: ROBERT L. LUKE

04/25/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LUKE, ROBERT L.,
Address: 7748 BOBCAT RUN
City-St-Zip: PORT ST. LUCIE, FL

Title: STD () Delete
Name: LUKE, CHERYL D.,
Address: 7748 BOBCAT RUN
City-St-Zip: PORT ST. LUCIE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LUKE, ROBERT L PD
Address: 7748 BOBCAT RUN
City-St-Zip: PORT ST. LUCIE, FL 34952 US

Title: STD (X) Change () Addition
Name: LUKE, CHERYL D STD
Address: 7748 BOBCAT RUN
City-St-Zip: PORT ST. LUCIE, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHERYL D. LUKE

STD

04/25/2003

Electronic Signature of Signing Officer or Director

Date