

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000009506

**Entity Name:** PRESCRIBED REHABILITATION, INC.

**Current Principal Place of Business:**

2325 KEITH STREET  
TALLAHASSEE, FL 32310

**Current Mailing Address:**

2325 KEITH STREET  
TALLAHASSEE, FL 32310

**FEI Number:** 47-5176749

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

GRANT, CHARLOTTE D  
2325 KEITH STREET  
TALLAHASSEE, FL 32310 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            CEO  
Name            GRANT, CHARLOTTE D  
Address        2325 KEITH STREET  
City-State-Zip: TALLAHASSEE FL 32310

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHARLOTTE GRANT

CEO

05/01/2016

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date