## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050932

Entity Name: 12 KEYS REHAB INC.

**Current Principal Place of Business:** 

618 NE JENSEN BEACH BLVD JENSEN BEACH, FL 34957

**Current Mailing Address:** 

624 GRASSMERE PARK

SUITE 11

NASHVILLE. TN 37211 US

FEI Number: 26-2661527 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

618 NE JENSEN BEACH BLVD JENSEN BEACH, FL 34957 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: KEVIN D LEE 04/27/2018

> Date Electronic Signature of Registered Agent

**FILED** Apr 27, 2018

**Secretary of State** 

CC9285375385

Date

Officer/Director Detail:

**SECRETARY** Title Title **PRESIDENT** Name MACMASTER, SAMUEL Name LEE, KEVIN D

Address 5500 MARYLAND WAY Address 5500 MARYLAND WAY **STE 200** 

STE 200

BRENTWOOD TN 37027 BRENTWOOD TN 37027 City-State-Zip: City-State-Zip:

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.

04/27/2018 CEO/PRESIDENT SIGNATURE: KEVIN LEE