

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000103293

Entity Name: REGIONAL REHAB ASSOCIATES, P.A.

Current Principal Place of Business:

1865 VETERANS PARK DR, SUITE 101
NAPLES, FL 34109

Current Mailing Address:

P O BOX 111090
NAPLES, FL 34108

FEI Number: 22-3383833

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAFFE, PETER
1865 VETERANS PARK DR, SUITE 101
NAPLES, FL 34109 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: PETER JAFFE

04/09/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PVPS
Name JAFFE, PETER J
Address 1865 VETERANS PARK DR, SUITE 101
City-State-Zip: NAPLES FL 34109

Title T
Name JAFFE, PETER J
Address 1865 VETERANS PARK DR, SUITE 101
City-State-Zip: NAPLES FL 34109

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: PETER JAFFE

PRESIDENT

04/09/2018

Electronic Signature of Signing Officer/Director Detail

Date