

1.) CORPORATION NAME:

REHAB PROVIDER NETWORK - EAST I, INC.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.
AUTH IN VI
CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

DUE DATE: **10/29/2010**

SCC ID NO: **F1486572**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4714 GETTYSBURG RD

CITY/ST/ZIP: MECHNICSBURG, PA 17055-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: ROBERT A ORTENZIO
TITLE: PRESIDENT
ADDRESS: 4716 OLD GETTYSBURG RD
CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055-

OFFICER DIRECTOR

NAME: JOHN F DUGGAN
TITLE: VP/ASST SEC
ADDRESS: 4716 OLD GETTYSBURG RD
CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055-

OFFICER DIRECTOR

NAME: SCOTT A ROMBERGER
TITLE: VP/T/ASST SEC
ADDRESS: 4716 OLD GETTYSBURG RD
CITY/ST/ZIP/CO: MECHNICSBURG, PA 17055-

OFFICER DIRECTOR

NAME: MICHEAL E TARVIN
TITLE: VP/SEC
ADDRESS: 4716 OLD GETTYSBURG RD
CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055-

OFFICER DIRECTOR

NAME: ROCCO A ORTENZIO
TITLE: DIRECTOR
ADDRESS: 4716 OLD GETTYSBURG RD
CITY/ST/ZIP/CO: MECHNICSBURG, PA 17055-

OFFICER DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ MICHEAL E TARVIN</u>	<u>MICHEAL E TARVIN, VP/SEC</u>	<u>8/26/2010</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.