

1.) CORPORATION NAME: <b>Rehab Provider Network of Virginia, Inc.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CT CORPORATION SYSTEM          4701 COX RD STE 301          GLEN ALLEN, VA 23060-6802</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HENRICO COUNTY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>DE</b>	DUE DATE: <b>1/31/2013</b> SCC ID NO: <b>F1656190</b> 5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 4714 GETTYSBURG RD CITY/ST/ZIP: MECHANICSBURG, PA 17055
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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: JOHN F DUGGAN TITLE: PRESIDENT ADDRESS: 4714 GETTYSBURG RD CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ROBERT A ORTENZIO TITLE: PRESIDENT ADDRESS: 4714 GETTYSBURG RD CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: KENNETH L MOORE TITLE: VICE PRESIDENT ADDRESS: 4714 GETTYSBURG RD CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: SCOTT A ROMBERGER TITLE: VICE PRESIDENT ADDRESS: 4714 GETTYSBURG RD CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ROCCO A ORTENZIO TITLE: CHAIRMAN ADDRESS: 4714 GETTYSBURG RD CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> 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.

/s/ JOHN F DUGGAN	JOHN F DUGGAN, PRESIDENT	11/30/2012
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.