



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000553420

2. Name of Corporation ALLIANCE REHAB, INC

3. Street Address Principal Business Office:

No. and Street: 28100 TORCH PARKWAY
SUITE 600

City or Town: WARRENVILLE

State: IL

Zip: 60555

Country: USA

4. Business Phone No.

630-413-5800

5. State of Incorporation

State: IL

6. Brief Description of the Character of Business Conducted in Rhode Island

REHAB MANAGEMENT CONSULTING FOR SKILLED NURSING FACILITIES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN CALLEN	1520 KENSINGTON ROAD, SUITE 110 OAK BROOK, IL 60523 USA
CEO	JILL M KRUEGER	1520 KENSINGTON ROAD, STE 110 OAK BROOK, IL 60523 USA
CFO	THOMAS L NOESEN JR	1520 KENSINGTON ROAD, STE 110 OAK BROOK, IL 60523 USA
VICE PRESIDENT	LINDA KOLLENG	1520 KENSINGTON ROAD, STE 110 OAK BROOK, IL 60523 USA

SECRETARY	MARIE CARLSON	3150 SALT CREEK LANE ARLINGTON HEIGHTS, IL 60005 USA
TREASURER	MARIE CARLSON	3150 SALT CREEK LANE ARLINGTON HEIGHTS, IL 60005 USA
DIRECTOR	KEVIN MCGEE	2320 W. 113TH PLACE, SUITE 1335 CHICAGO, IL 60643 USA
DIRECTOR	JOE HAUGHNEY	5700 OLD ORCHARD ROAD SKOKIE, IL 60077 USA
DIRECTOR	BILL DE YOUNG	18601 N. CREEK DRIVE TINLEY PARK, IL 60477 USA
DIRECTOR	STEVE YENCHEK	350 W. SCHAUMBURG ROAD SCHAMBURG, IL 60194 USA
DIRECTOR	CAROL SUSSENBACH	1603 ORRINGTON AVE. EVANSTON, IL 60201 USA
DIRECTOR	MIKE TOOHEY	6016 NORTH NINA AVE. CHICAGO, IL 60631 USA
DIRECTOR	TIMOTHY RHODES	1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 USA
DIRECTOR	BILL LOWE	1415 WEST FOSTER AVE. CHICAGO, IL 60640 USA
DIRECTOR	JULIE BOGGESE	2833 NORTH NORDICA AVE. CHICAGO, IL 60634 USA
DIRECTOR	CHARLES NEWTON	4747 N. CANFIELD AVE. NORRIDGE, IL 60706 USA
DIRECTOR	JUDY AMIANO	1055 W. 175TH STREET, SUITE 202 HOMWOOD, IL 60430 USA
DIRECTOR	RON TINSLEY	1055 W. 175TH STREET, SUITE 202 HOMWOOD, IL 60430 USA
DIRECTOR	JIM HOLBROOK	3150 SALT CREEK LANE ARLINGTON HEIGHTS, IL 60005 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	10,000.00	1400

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 19 Day of February, 2015 at 2:49:42 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By THOMAS L NOESEN JR
Signature of Authorized Representative of the Corporation

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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