2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000025311

Entity Name: TRINITY REHABILC

FILED May 01, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4032 CHADWICK AVENUE 10105 CORTEZ BLVD SPRING HILL, FL 34608 US BROOKSVILLE, FL 34613 US

Current Mailing Address: New Mailing Address:

4032 CHADWICK AVENUE 10105 CORTEZ BLVD SPRING HILL, FL 34608 US SPRING HILL, FL 34613 US

FEI Number: 20-0946409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THANGAVELU, MOHAN

4032 CHADWICK AVENUE

SPRING HILL, FL 34608 US

SOMASUNDARAM, SOZHAVARMAN
1279 MASADA LANE
SPRING HILL, FL 34608 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: SOZHAVARMAN SOMASUNDARAM 05/01/2005

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: THANGAVELU, MOHAN SEC Name: SOMASUNDARAM, SOZHAVARMAN Address: 4032 CHADWICK AVENUE Address: 1279 MASADA LANE

City-St-Zip: SPRING HILL, FL 34608 US City-St-Zip: SPRING HILL, FL 34608 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:SOMASUNDARAM, SOZHAVARMAN VPName:THANGAVELU, MOHANAddress:1279 MASADA LANEAddress:4032 CHADWICK AVENUECity-St-Zip:SPRING HILL, FL 34608 USCity-St-Zip:SPRING HILL, FL 34608 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SOZHAVARMAN SOMASUNDARAM MGRM 05/01/2005