

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000103926

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** A NEW DAY THERAPEUTIC SERVICES, LLC

**Current Principal Place of Business:**

9900 W. SAMPLE ROAD  
318  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

9900 W. SAMPLE ROAD  
300  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

5721 RIVERSIDE DRIVE  
202  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

FEI Number: 27-1207890      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHIMMEL, DANIEL  
9900 W. SAMPLE ROAD  
318  
CORAL SPRINGS, FL 33065 US

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

SCHIMMEL, DANIEL  
9900 W. SAMPLE ROAD  
300  
CORAL SPRINGS, FL 33065 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/05/2011

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MANG  
Name: SCHIMMEL, DANIEL  
Address: 5721 RIVERSIDE DRIVE #202  
City-St-Zip: CORAL SPRINGS, FL 33067 US

I hereby 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: DANIEL SCHIMMEL

MANG

01/05/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date