

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000104126

FILED
Apr 06, 2011
Secretary of State

Entity Name: TRINITY MEDICAL INVESTMENTS, LLC

Current Principal Place of Business:

2040 NE COACHMAN RD
SUITE C
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

2040 NE COACHMAN RD
SUITE C
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 27-1206702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, GREGORY D ESQ.
1201 S. HIGHLAND AVE
SUITE 9
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

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

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: KEYSTONE HEALTHCARE & REHAB SVCS, INC.
Address: 2040 NE COACHMAN, SUITE C
City-St-Zip: CLEARWATER, FL 33765

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: KEYSTONE HEALTHCARE & REHAB SVCS, MGRM 04/06/2011

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