

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000001441

FILED
Feb 23, 2010
Secretary of State

Entity Name: AVANTI REHABILITATION MANAGEMENT, LLC

Current Principal Place of Business:

339 ARDENWOOD DRIVE
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

339 ARDENWOOD DRIVE
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 04-3788551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFLAMME, ELIZABETH
339 ARDENWOOD DRIVE
ENGLEWOOD, FL 34223 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: MGR
Name: LAFLAMME, ELIZABETH C
Address: 339 ARDENWOOD DRIVE
City-St-Zip: ENGLEWOOD, FL 34223

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: ELIZABETH C LAFLAMME

MGR

02/23/2010

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