### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089131

Entity Name: EMERALD COAST REHABILITATION CENTER, LLC

FILED Feb 25, 2023 Secretary of State 9066632877CC

## **Current Principal Place of Business:**

1665 PALM BEACH LAKES BLVD. SUITE 400

WEST PALM BEACH, FL 33401

# **Current Mailing Address:**

1665 PALM BEACH LAKES BLVD. SUITE 400 WEST PALM BEACH, FL 33401 US

FEI Number: 26-3411532 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD SUITE 1550 PLANTATION, FL 33324 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

Date

## Authorized Person(s) Detail:

Title MANAGER

Name JAFFE, HOWARD

Address 1665 PALM BEACH LAKES BLVD.

SUITE 400

City-State-Zip: WEST PALM BEACH FL 33401

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HOWARD JAFFE MANAGER 02/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date