#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000052582

Entity Name: REHABILITATION INITIATIVES, LLC

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

1390 SUNSET POINT ROAD CLEARWATER, FL 33755

## **Current Mailing Address:**

1390 SUNSET POINT ROAD CLEARWATER, FL 33755 US

### FEI Number: 90-0971097

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

COLE, KATHERINE E. ESQ. 101 E. KENNEDY BLVD. SUITE 3700 TAMPA, FL 33602 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: KATHERINE E. COLE

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	MGR
Name	STILO, GLEN
Address	1390 SUNSET POINT ROAD
City-State-Zip:	CLEARWATER FL 33755

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.

MANAGER

04/16/2015

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 16, 2015 Secretary of State CC3546096357

Certificate of Status Desired: No

04/16/2015 Date

Date