

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000065855

Entity Name: SUNRISE MEDICAL AND REHAB LLC

Current Principal Place of Business:

3277 FRUITVILLE RD., A-2
SARASOTA, FL 34237

Current Mailing Address:

3277 FRUITVILLE RD., A-2
SARASOTA, FL 34237 US

FEI Number: 82-0683171

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOSCOW, JEFFREY M
3277 FRUITVILLE RD., A-2
SARASOTA, FL 34237 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: JEFFREY M MOSCOW

01/21/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AR
Name MOSCOW, JEFFREY M
Address 3277 FRUITVILLE RD., A-2
City-State-Zip: SARASOTA FL 34237

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: JEFFREY MOSCOW

REGISTERED AGENT

01/21/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date