## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000065855

Entity Name: SUNRISE MEDICAL AND REHAB LLC

Current Principal Place of Business:

1071 S. TUTTLE AVE., SUITE 1 SARASOTA, FL 34237

## **Current Mailing Address:**

1071 S. TUTTLE AVE., SUITE 1 SARASOTA, FL 34237 US

FEI Number: 82-0683171 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MOSCOW, JEFFREY M 1071 S. TUTTLE AVE., SUITE 1 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 01/30/2019

Electronic Signature of Registered Agent

Date

FILED Jan 30, 2019

**Secretary of State** 

4924067309CC

## Authorized Person(s) Detail:

Title AR

Name MOSCOW, JEFFREY M

Address 1071 S. TUTTLE AVE., SUITE 1

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.

Electronic Signature of Signing Authorized Person(s) Detail