

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000217821

**Entity Name:** JACKSONVILLE REH LLC

**Current Principal Place of Business:**

1045 CADY CIRCLE  
TITUSVILLE, FL 32780

**Current Mailing Address:**

1045 CADY CIRCLE  
TITUSVILLE, FL 32780 US

**FEI Number:** 83-1955521

**Certificate of Status Desired:** No

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

SHASTRI, ALKESH  
1045 CADY CIRCLE  
TITUSVILLE, FL 32780 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 MGR  
Name SHASTRI, ALKESH  
Address 1045 CADY CIR  
City-State-Zip: TITUSVILLE FL 32780

Title MGR  
Name SHAH, RAJENDRA  
Address 380 COMMERCE PKWY  
City-State-Zip: ROCKLEDGE FL 32955

Title MGR  
Name SHAH, NILESH  
Address 4802 SOLITARY DR  
City-State-Zip: ROCKLEDGE FL 32955

Title MGR  
Name PATEL, PARUL  
Address 7632 SOUTHSIDE BLVD  
APT #346  
City-State-Zip: JACKSONVILLE FL

*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:** ALKESH SHASTRI

**MANAGER**

**04/28/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date