2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# L01000020487

Entity Name: TAMPA MEDICAL & REHAB CARE, LLC

Current Principal Place of Business:

4107 N. HIMES AVENUE
SUITE 101
TAMPA, FL 33607

New Principal Place of Business:

829 W MARTIN LUTHER KING JR. BLVD
SUITE 105
TAMPA, FL 33603

Current Mailing Address:

4107 N. HIMES AVENUE
SUITE 101
TAMPA, FL 33607

New Mailing Address:

829 W MARTIN LUTHER KING JR. BLVD
SUITE 105
TAMPA, FL 33603

FEI Number: 59-3755780 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

YCAZA, LUIS F
4107 N. HIMES AVENUE
SUITE 101
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

YCAZA, LUIS F
829 W MARTIN LUTHER KING JR. BLVD
SUITE 105
TAMPA, FL 33603 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: LUIS F YCAZA 01/05/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: YCAZA, LUIS F
Address: 829 W MARTIN LUTHER KING JR. BLVD, S. 105
City-St-Zip: TAMPA, FL 33603

I hereby certify that the information indicated on this 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 608, Florida Statues.

SIGNATURE: LUIS F YCAZA MGR 01/05/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date