

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022700

FILED
Feb 15, 2012
Secretary of State

Entity Name: ABILITY REHABILITATION CENTER, LLC

Current Principal Place of Business:

1200 LEXINGTON GREEN LANE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

1200 LEXINGTON GREEN LANE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 20-0051737

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRACEY, MARK
1200 LEXINGTON GREEN LANE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MR
Name: TRACEY, MARK
Address: 1242 W PARTILLO DR
City-St-Zip: DELTONA, FL 32725

Title: MR
Name: GUERRINA, JOHN E VP
Address: 2382 RIVER TREE CIRCLE
City-St-Zip: SANFORD, FL 32771

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 Statutes.

SIGNATURE: MARK TRACEY

PRES

02/15/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date