

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037294

FILED
Mar 17, 2009
Secretary of State

Entity Name: ALL WAYS ACCESSIBLE REHAB, LLC

Current Principal Place of Business:

610 MAGNOLIA AVENUE
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

4898 LAKE JULIANA RESERVE
AUBURNDALE, FL 33823

New Mailing Address:

P.O. BOX 950
AUBURNDALE, FL 33823

FEI Number: 20-0309684

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLOCK, DAVID D JR
ONE LAKE MORTON DRIVE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

VANDERPOOL, WILLIAM M JR
4898 JULIANNA RESERVE DRIVE
AUBURNDALE, FL 33823 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: WILLIAM M. VANDERPOOL

03/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VANDERPOOL, WILLIAM
Address: 4898 LAKE JULIANA RESERVE
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: VANDERPOOL, WILLIAM M
Address: 4898 JULIANA RESERVE DRIVE
City-St-Zip: AUBURNDALE, FL 33823

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: WILLIAM M VANDERPOOL

MGRM

03/17/2009

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