

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024426

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: SARASOTA LTAC PROPERTIES, LLC

## Current Principal Place of Business:

ONE HEALTHSOUTH PKWY  
BIRMINGHAM, AL 35243

## New Principal Place of Business:

## Current Mailing Address:

ONE HEALTHSOUTH PKWY  
BIRMINGHAM, AL 35243

## New Mailing Address:

FEI Number: 20-0978999

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CPD ( ) Delete  
Name: GRINNEY, JAY  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: VD ( ) Delete  
Name: SNOW, MICHAEL D  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: VSD ( ) Delete  
Name: DOODY, GREGORY L  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: V ( ) Delete  
Name: MENKE, BRIAN M  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: VAS ( ) Delete  
Name: MARTN, JODY  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: VTD ( ) Delete  
Name: WORKMAN, JOHN  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VSD (X) Change ( ) Addition  
Name: WHITTINGTON, JOHN P  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: V (X) Change ( ) Addition  
Name: MCANDREWS, JAMES P  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: AS (X) Change ( ) Addition  
Name: MARTN, JODY  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JODY MARTIN

AS

04/24/2007

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