2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2012
Secretary of State

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Entity Name: REHAB INVESTMENTS LLC

Current Principal Place of Business:

5442 COUNTY RD 661A
ARCADIA, FL 34266 US

New Principal Place of Business:

4518 SW TYNER AVE
ARCADIA, FL 34266 US

Current Mailing Address:

P. O. BOX 1324
ARCADIA, FL 34266 US

New Mailing Address:

FEI Number: 20-1009963 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURSA, HANS
5442 NW CR 661A
ARCADIA, FL 34266 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: MGRM
Name: BURSA, HANS
Address: PO BOX 1324
City-St-Zip: ARCADIA, FL 34265 US

Title: MGRM
Name: BURSA, ANN K
Address: PO BOX 1324
City-St-Zip: ARCADIA, FL 34265 US

Title: MGRM
Name: BURSA, ANN K
Address: P. O. BOX 1324
City-St-Zip: ARCADIA, FL 34266 US

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Name: BURSA, ANN K
Address: P. O. BOX 1324
City-St-Zip: ARCADIA, FL 34266 US

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: ANN K. BURSA MGRM 04/30/2012

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