

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000002242

**FILED  
Jan 04, 2011  
Secretary of State**

**Entity Name:** BRANDON COMMUNITY HEALTH & REHABILITATION, LC

**Current Principal Place of Business:**

162 W ROBERTSON ST.  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

162 W ROBERTSON ST.  
BRANDON, FL 33511

**New Mailing Address:**

FEI Number: 20-2141007      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STONE, ROBIN R  
162 W ROBERTSON ST.  
BRANDON, FL 33511    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: STONE, ROBIN R  
Address: 162 W ROBERTSON ST.  
City-St-Zip: BRANDON, FL 33511

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: ROBIN RENEE STONE      MGRM      01/04/2011

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