

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000040250

Entity Name: REHAB ACCESS, L.L.C.

FILED
Apr 04, 2007
Secretary of State

Current Principal Place of Business:

4347 DINNER LAKE BOULEVARD
LAKE WALES, FL 33859

New Principal Place of Business:

Current Mailing Address:

4347 DINNER LAKE BOULEVARD
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: 56-2509457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELMONTE, BENJAMIN V CPA
2183 US HIGHWAY 27 N
SEBRING, FL 33870 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: PT () Delete
Name: SIGUA, RONEL M
Address: 4347 DINNER LAKE BLVD.
City-St-Zip: LAKE WALES, FL 33859

Title: PT () Delete
Name: JENNIFER, SORIANO H
Address: 1164 LAKE PLACE COURT
City-St-Zip: LAKELAND, FL 33805

Title: PT () Delete
Name: OCAMPO, RACHIELA P
Address: 5830 CHAPS DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: PT () Delete
Name: CRUZ, JOANNA S
Address: 3906 CORTEZ BLVD.
City-St-Zip: SEBRING, FL 33872

ADDITIONS/CHANGES:

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

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

Title: PT (X) Change () Addition
Name: OCAMPO, RACHIELA P
Address: 905 HAMILTON PLACE DRIVE
City-St-Zip: LAKELAND, FL 33813

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: RONEL M. SIGUA

PT

04/04/2007

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