

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000040250

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

FILED
Mar 04, 2011
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
3735 CONROY ROAD
SUITE # 2221
ORLANDO, FL 32839 US

Name and Address of New Registered Agent:

VELMONTE, BENJAMIN V CPA
929 HIALEAH DRIVE
ROCKLEDGE, FL 32955 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:

03/04/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PT
Name: SIGUA, RONEL M
Address: 4347 DINNER LAKE BLVD.
City-St-Zip: LAKE WALES, FL 33859

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

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

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

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: RONEL M. SIGUA

PT

03/04/2011

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