

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044016

FILED
Apr 26, 2007
Secretary of State

Entity Name: OCALA REHABILITATION SPECIALISTS, LLC

Current Principal Place of Business:

5345 SW COLLEGE RD., SUITE 402
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

5345 SW COLLEGE RD., SUITE 402
OCALA, FL 34474

New Mailing Address:

FEI Number: 20-2831254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABASBAS, JESSIE
8944 SW 54TH COURT
OCALA, FL 34476 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: MGR () Delete
Name: LABASBAS, JESSIE
Address: 8944 SW 54TH COURT
City-St-Zip: OCALA, FL 34476

Title: MGR () Delete
Name: LAUREANO, AUGUSTO
Address: 5655 SW 42ND COURT
City-St-Zip: OCALA, FL 34480

Title: MGR () Delete
Name: FLORIDA REHABILITATI, ON SPECIALIST, LLC
Address: 134 N OLD DIXIE HWY
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: AUGUSTO LAUREANO

MGR

04/26/2007

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