

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 26, 2010
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 (X)

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

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

Title: MGR
Name: FLORIDA REHABILITATION SPECIALIST, LLC
Address: 134 N OLD DIXIE HWY
City-St-Zip: LADY LAKE, FL 32159

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: JESSIE LABASBAS

MGR

01/26/2010

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