

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044016

FILED
Jan 04, 2011
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:

LABASBAS, JESSIE
5345 SW COLLEGE ROAD
STE 402
OCALA, FL 34474 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: JESSIE LABASBAS

01/04/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: LABASBAS, JESSIE
Address: 5345 SW COLLEGE ROAD, SUITE 402
City-St-Zip: OCALA, FL 34474

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

01/04/2011

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