

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000013078

**FILED**  
**Jan 22, 2010**  
**Secretary of State**

**Entity Name:** PROGRESSIVE REHABILITATION, LLC

**Current Principal Place of Business:**

256 NW 42ND AVENUE  
MIAMI, FL 33126

**New Principal Place of Business:**

701 NW 57 AVENUE  
200  
MIAMI, FL 33126

**Current Mailing Address:**

256 NW 42ND AVENUE  
MIAMI, FL 33126

**New Mailing Address:**

701 NW 57 AVENUE  
200  
MIAMI, FL 33126

**FEI Number:** 20-4253309

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEVINE, JEREMY D  
328 MINORCA AVENUE  
CORAL GABLES, FL 33134 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: LEVINE, JASON  
Address: 701 NW 57 AVENUE, SUITE 200  
City-St-Zip: MIAMI, FL 33126

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: JASON LEVINE

MGR

01/22/2010

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