

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064800

Entity Name: REHAB IN MOTION, L.L.C.

FILED
Jan 19, 2010
Secretary of State

Current Principal Place of Business:

15275 COLLIER BLVD., SUITE 201
P.M.B. 209
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

14620 BEAUFORT CIR.
NAPLES, FL 34119

New Mailing Address:

FEI Number: 43-2096411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCMEEEKAN, GRAEME P
14620 BEAUFORT CIRCLE
NAPLES, FL 34119 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: MGRM
Name: MCMEEEKAN, GRAEME P
Address: 15275 COLLIER BLVD., SUITE 201, P.M.B. 209
City-St-Zip: NAPLES, FL 34119

Title: MGRM
Name: HESS, SAMUEL J M.D.
Address: 1100 VIA TRIPOLI
City-St-Zip: PUNTA GORDA, FL 33950

Title: MGRM
Name: MCLOUGHLIN, JAMES M.D.
Address: 2812 WOODMERE DRIVE
City-St-Zip: PANAMA CITY, FL 32405

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: GRAEME P. MCMEEEKAN

CEO

01/19/2010

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