

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000067549

Entity Name: REHAB OASIS, LLC

FILED
Jan 29, 2012
Secretary of State

Current Principal Place of Business:

3206 S. HOPKINS AVE
19
TITUSVILLE, FL 32780 US

New Principal Place of Business:

Current Mailing Address:

3206 S. HOPKINS AVE
19
TITUSVILLE, FL 32780 US

New Mailing Address:

FEI Number: 03-0598618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUBBER, WILLIAM CPA
4840 HONEYRIDGE LANE
MERRITT ISLAND, FL 32952 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: CEO
Name: SCHRUMPF, TERRY
Address: 3206 S. HOPKINS AVE
City-St-Zip: TITUSVILLE, FL 32780 US

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: TERRY SCHRUMPF

CEO

01/29/2012

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