

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120927

FILED  
Sep 18, 2009  
Secretary of State

Entity Name: ALL AROUND REHABILITATION CENTER LLC

## Current Principal Place of Business:

1061 COLLIER CENTER WAY, STE 6  
NAPLES, FL 34110

## New Principal Place of Business:

10641 AIRPORT RD N.  
STE 32  
NAPLES, FL 34109 US

## Current Mailing Address:

1061 COLLIER CENTER WAY, STE 6  
NAPLES, FL 34110

## New Mailing Address:

10641 AIRPORT RD N.  
STE 32  
NAPLES, FL 34109 US

FEI Number: 20-8088927      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 US

## Name and Address of New Registered Agent:

FINER, THERESA M  
10641 AIRPORT RD N.  
SUITE 32  
NAPLES, FL 34109 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: THERESA M. FINER

09/18/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MATHIEU, VLADIMIR  
Address: 1061 COLLIER CENTER WAY, STE 6  
City-St-Zip: NAPLES, FL 34110

Title: MGRM (X) Delete  
Name: FINER, THERESA  
Address: 1061 COLLIER CENTER WAY SUITE 6  
City-St-Zip: NAPLES, FL 34110 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MATHIEU, VLADIMIR J  
Address: 11181 HEALTH PARK BLVD - SUITE 3000  
City-St-Zip: NAPLES, FL 34110 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: VLADIMIR MATHIEU

MGR

09/18/2009

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