

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000016158

Entity Name: MEDSTAFF & REHAB, LLC

FILED  
Apr 29, 2008  
Secretary of State

**Current Principal Place of Business:**

14863 HAWKSMOOR RUN CIRCLE  
ORLANDO, FL 32828

**New Principal Place of Business:**

**Current Mailing Address:**

14863 HAWKSMOOR RUN CIRCLE  
ORLANDO, FL 32828

**New Mailing Address:**

FEI Number: 20-8429027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORTENSON, LISA D  
14863 HAWSMOOR RUN CIRCLE  
ORLANDO, FL 32828 US

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

TAWAN ACCOUTING & TAX, LLC  
13000 AVALON LAKE DRIVE  
207  
ORLANDO, FL 32828 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: TAWAN TURNQUEST

04/29/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MORTENSON, LISA D  
Address: 14863 HAWKSMOOR RUN CIRCLE  
City-St-Zip: ORLANDO, FL 32828 US

Title: MGRM ( ) Delete  
Name: MORTENSON, TODD  
Address: 14863 HAWKSMOOR RUN CIRCLE  
City-St-Zip: ORLANDO, FL 32828 US

**ADDITIONS/CHANGES:**

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

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: LISA MORTENSON

MGRM

04/29/2008

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