2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 30, 2010
Secretary of State

DOCUMENT# L07000022605

Entity Name: AT HOME REHAB CARE, LLC

Current Principal Place of Business:

3967 ROYAL PINES DR.
ORANGE PARK, FL 32065

New Principal Place of Business:

Current Mailing Address:

3967 ROYAL PINES DR.
ORANGE PARK, FL 32065

New Mailing Address:

FEI Number: 38-3752989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VARIAS, GIOVANNI L
3967 ROYAL PINES DR.
ORANGE PARK, FL 32065 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: VARIAS, GIOVANNI L
Address: 3967 ROYAL PINES DR.
City-St-Zip: ORANGE PARK, FL 32065

Title: MGRM
Name: VARIAS, KRIS C
Address: 3967 ROYAL PINES DR.
City-St-Zip: ORANGE PARK, FL 32065

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 Statues.

SIGNATURE: GIOVANNI VARIAS MGR 03/30/2010

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