

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050104

FILED
Apr 24, 2010
Secretary of State

Entity Name: GULFSIDE HEALTH & REHAB CENTER, L.L.C.

Current Principal Place of Business:

8316 HANLEY ROAD
SUITE 1
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

9438 US HIGHWAY 19 NORTH
182
PORT RICHEY, FL 34668 US

New Mailing Address:

8316 HANLEY ROAD
SUITE 1
TAMPA, FL 33634 US

FEI Number: 06-1814894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAMANTIDES, STEPHEN
9438 US HIGHWAY 19 NORTH
182
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

DIAMANTIDES, STEPHEN
8316 HANLEY ROAD
SUITE 1
TAMPA, FL 33634 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: STEPHEN DIAMANTIDES

04/24/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DIAMANTIDES, STEPHEN
Address: 8316 HANLEY ROAD STE 1
City-St-Zip: TAMPA, FL 33634 US

Title: MGR
Name: DEL SOL GONZALEZ, YOEL
Address: 8316 HANLEY ROAD STE 1
City-St-Zip: TAMPA, FL 33634 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: YOEL DEL SOL

MGR

04/24/2010

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