

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000004187

FILED
Apr 11, 2012
Secretary of State

Entity Name: OVERCOMERS REHAB & PHYSICAL THERAPY SERVICES, LLC

Current Principal Place of Business:

51 CAROLINA ST. NW
103
W. MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

1126 WOODSMERE PKWY
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 26-1758216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELSE, ANTHONY
1126 WOODSMERE PKWY
ROCKLEDGE, FL 32955 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: MGR
Name: ELSE, ANTHONY
Address: 1126 WOODSMERE PKWY
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGR
Name: ELSE, WENDY
Address: 1126 WOODSMERE PKWY
City-St-Zip: ROCKLEDGE, FL 32955

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: WENDY ELSE

MGR

04/11/2012

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