

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000027994

FILED
Apr 30, 2011
Secretary of State

Entity Name: RESILIENCE REHAB & EDUCATIONAL SERVICES, LLC

Current Principal Place of Business:

4554 CENTRAL AVENUE
SUITE C
ST. PETERSBURG, FL 33711

New Principal Place of Business:

146 2ND STREET NORTH
SUITE 310
ST. PETERSBURG, FL 33701

Current Mailing Address:

4554 CENTRAL AVENUE
SUITE C
ST. PETERSBURG, FL 33711

New Mailing Address:

P.O. BOX 35159
ST. PETERSBURG, FL 33705

FEI Number: 26-2197909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRYANT-JONES, MARIA R
4554 CENTRAL AVENUE
SUITE C
ST. PETERSBURG, FL 33711 US

Name and Address of New Registered Agent:

BRYANT-JONES, MARIA R
146 2ND STREET NORTH
SUITE 310
ST. PETERSBURG, FL 33701 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: MARIA R BRYANT-JONES

04/30/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BRYANT, MARIA R
Address: P.O. BOX 35159
City-St-Zip: ST. PETERSBURG, FL 33705

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: MARIA R BRYANT-JONES

MGR

04/30/2011

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