

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042998

FILED
Apr 12, 2012
Secretary of State

Entity Name: VARSITY OMEGA REHABILITATION, LLC

Current Principal Place of Business:

1 SOUTH OLD KINGS ROAD
SUITE A
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1 SOUTH OLD KINGS ROAD
SUITE A
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 26-2726372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINNON, NOAH C JR. ESQ
595 W. GRANDA BLVD., SUITE A
ORMOND BEACH, FL 32174 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: XYNIDIS, NICHOLAS S
Address: 521 N. HALIFAX AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: MGRM
Name: CARN, DAVID E
Address: 27 WINCHESTER ROAD
City-St-Zip: ORMOND BEACH, FL 32174

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: DAVID E CARN

PART

04/12/2012

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