

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000101077

FILED
Feb 08, 2011
Secretary of State

Entity Name: TAMPA REHAB & CHIROPRACTIC, LLC

Current Principal Place of Business:

5511 HANDLEY AVE.
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

8710 W. HILLSBOROUGH AVE
323
TAMPA, FL 33615

New Mailing Address:

FEI Number: 90-0426722

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

MOONEY, ALBERTO
8710 W HILLSBOROUGH AVE
SUITE 323
TAMPA, FL 33615 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: ALBERTO MOONEY

02/08/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MOONEY, ALBERTO A
Address: 5511 HANDLEY AVE.
City-St-Zip: TAMPA, FL 33634

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: ALBERTO MOONEY

PRES

02/08/2011

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