

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000010125

FILED
Apr 23, 2012
Secretary of State

Entity Name: POSADA'S REHABILITATION SERVICES, LLC

Current Principal Place of Business:

633 NW AVE G
BELLE GLADE, FL 3340

New Principal Place of Business:

11120 S CROWN WAY
SUITE 8
WELLINGTON, FL 333414

Current Mailing Address:

PO BOX 2484
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 26-4311956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POSADA, ARON
633 NW AVE G
BELLE GLADE, FL 33430 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: POSADA, ARON
Address: 633 NW AVE G
City-St-Zip: BELLE GLADE, FL 33430

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: ARON POSADA

MGRM

04/23/2012

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