

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000039111

**FILED**  
**Mar 15, 2010**  
**Secretary of State**

**Entity Name:** LAKELAND COMMUNITY HEALTH AND REHABILITATION, LLC

**Current Principal Place of Business:**

156 WEST ROBERTSON STREET  
BRANDON, FL 33511 US

**New Principal Place of Business:**

200 PARKVIEW PL  
SUITE 201  
LAKELAND, FL 33805 US

**Current Mailing Address:**

156 WEST ROBERTSON STREET  
BRANDON, FL 33511 US

**New Mailing Address:**

FEI Number: 26-4729154

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THE LAW OFFICES OF NICK SPRADLIN, PLLC  
12000 NORTH DALE MABRY HWY  
SUITE 110  
TAMPA, FL 33618 US

**Name and Address of New Registered Agent:**

ROBIN, STONE R MGRM  
156 W ROBERTSON STREET  
BRANDON, FL 33511 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: ROBIN R STONE

03/15/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: STONE, ROBIN  
Address: 156 WEST ROBERTSON STREET  
City-St-Zip: BRANDON, FL 33511 US

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: ROBIN R STONE

MGRM

03/15/2010

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