

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000060656

FILED
Feb 18, 2011
Secretary of State

Entity Name: SSB THERAPY SERVICES, LLC

Current Principal Place of Business:

801 FLEMING DRIVE
BELLE GLADE, FL 33430 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2625
BELLE GLADE, FL 33430 US

New Mailing Address:

FEI Number: 27-0413836 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BAIR, SHELLI S
801 FLEMING DRIVE
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: MGR
Name: BAIR, SHELLI S
Address: 801 FLEMING DRIVE/ P.O. BOX 2625
City-St-Zip: BELLE GLADE, FL 33430 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: SHELLI S. BAIR

MGR

02/18/2011

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