

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000104690

FILED
Feb 17, 2010
Secretary of State

Entity Name: SPINE & SPORT REHAB INSTITUTE LLC

Current Principal Place of Business:

290 S. UNIVERSITY DR
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

290 S. UNIVERSITY DR
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 27-1159042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFREY T BERARD DC, PA
286 S UNIVERSITY DR
PLANTATION, FL 33324 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: DUBUC, MAURICE
Address: 16659 HEMINGWAY DRIVE
City-St-Zip: WESTON, FL 33326

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: MAURICE DUBUC

MGRM

02/17/2010

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