

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000010931

Entity Name: EVITRI REHAB LLC.

FILED  
Apr 23, 2011  
Secretary of State

## Current Principal Place of Business:

547 N SHORE DR  
SARASOTA, FL 34234

## New Principal Place of Business:

547 N SHORE DR  
0  
SARASOTA, FL 34234 UN

## Current Mailing Address:

547 N SHORE DR  
SARASOTA, FL 34234

## New Mailing Address:

547 N SHORE DR  
0  
SARASOTA, FL 34234 UN

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VULOPAS, PATRICIA A  
547 N SHORE DR  
SARASOTA, FL 34234 US

## Name and Address of New Registered Agent:

0  
547 N SHORE DR  
0  
SARASOTA, FL 34234 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: PATRICIA VULOPAS

04/23/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: VULOPAS, PATRICIA A  
Address: 547 N SHORE DR  
City-St-Zip: SARASOTA, FL 34324 UN

Title: MGRM  
Name: VULOPAS, GREGORY M  
Address: 547 N SHORE DR  
City-St-Zip: SARASOTA, FL 34234 UN

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: PATRICIA VULOPAS

MGR

04/23/2011

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