

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000104384

**FILED
Feb 22, 2011
Secretary of State**

Entity Name: ROBERTS THERAPY SOLUTIONS, LLC

Current Principal Place of Business:

11455 NW FORD FARM TRAIL
BRISTOL, FL 32321

New Principal Place of Business:

Current Mailing Address:

11455 NW FORD FARM TRAIL
BRISTOL, FL 32321

New Mailing Address:

FEI Number: 61-1630235 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, STEPHENIE
11455 NW FORD FARM TRAIL
BRISTOL, FL 32321 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: ROBERTS, STEPHENIE
Address: 11455 NW FORD FARM TRAIL
City-St-Zip: BRISTOL, FL 32321

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: STEPHENIE ROBERTS MGR 02/22/2011

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