

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109157

FILED
Jan 09, 2011
Secretary of State

Entity Name: SYNERGY REHAB SERVICES, LLC

Current Principal Place of Business:

8023 SW 86TH WAY
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

8023 SW 86TH WAY
GAINESVILLE, FL 32608 US

New Mailing Address:

FEI Number: 27-3771030

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASTRERO, JACQUELINE L PT, DPT
8023 SW 86TH WAY
GAINESVILLE, FL 32608 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: ASTRERO, JACQUELINE L PT, DPT
Address: 8023 SW 86TH WAY
City-St-Zip: GAINESVILLE, FL 32608 US

Title: MGRM
Name: ESPLANA, MYRA J RN
Address: 8023 SW 86TH WAY
City-St-Zip: GAINESVILLE, FL 32608 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: JACQUELINE L. ASTRERO

MGR

01/09/2011

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