

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000102281

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** FIRST MEDICAL AND REHAB OF BRADENTON, LLC.

**Current Principal Place of Business:**

3220 1ST STREET WEST  
BRADENTON, FL 34208

**New Principal Place of Business:**

**Current Mailing Address:**

3220 1ST STREET WEST  
BRADENTON, FL 34208

**New Mailing Address:**

FEI Number: 90-0757656

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRANCLIN, EVELYNE  
3220 1ST STREET WEST  
BRADENTON, FL 34208 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: P  
Name: FRANCLIN, EVELYNE  
Address: 3220 1ST STREET WEST  
City-St-Zip: BRADENTON, FL 34208

Title: MGR  
Name: SAINTJUSTE, HERODE  
Address: 3220 1ST STREET  
City-St-Zip: BRADENTON, FL 34208

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: FRANCLIN EVELYNE

P

05/01/2012

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