2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000133530

Entity Name: ACTIVE REHABILITATION CENTER LLC

FILED Apr 12, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1301 10TH STREET PALMETTO, FL 34221

Current Mailing Address: New Mailing Address:

11965 COLLIER BLVD #2 NAPLES, FL 34116

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

KIDD, DAVID DC 11965 COLLIER BLVD # 2 NAPLES, FL 34116 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title:

 Name:
 KIDD, DAVID

 Address:
 1301
 10TH STREET

 City-St-Zip:
 PALMETTO, FL 64221

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 Statues.

SIGNATURE: DAVID KIDD P 04/12/2012