

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90034 043 ****50.00

DOCUMENT # M04000002032

1. Entity Name
GENTIVA REHAB WITHOUT WALLS, LLC



Principal Place of Business
**3 HUNTINGTON QUADRANGLE, 200S
MELVILLE, NY 11747**

Mailing Address
**3 HUNTINGTON QUADRANGLE, 200S
MELVILLE, NY 11747**

40053632



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04052006 Chg-LLC CR2E083 (11/05)

4. FEI Number
06-1725406

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BLUMBERGEXCELSIOR CORPORATE SERVICES, INC
4435 OLD WINTER GARDEN RD.
ORLANDO, FL 32811**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
MALONE, RONALD A
3 HUNTINGTON QUADRANGLE, 200S
MELVILLE, NY 117474627** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCOO
PERRY, VERNON A
3 HUNTINGTON QUADRANGLE, 200S
MELVILLE, NY 11747** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Strange, H. Anthony
3350 Riverwood Parkway, Ste 1400
Atlanta, GA 30339** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VTS
POTAPCHUK, JOHN R
3 HUNTINGTON QUADRANGLE, 200S
MELVILLE, NY 11747** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
CREAMER, ROBERT
3 HUNTINGTON QUADRANGLE, 200S
MELVILLE, NY 11747** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
ANDERSON, CHRISTOPHER L
3 HUNTINGTON QUADRANGLE, 200S
MELVILLE, NY 11747** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**camperlengo, John N.
3 Huntington Quadrangle, Ste 200S
Melville, NY 11747** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
PAIGE, STEPHEN
3 HUNTINGTON QUADRANGLE, 200S
MELVILLE, NY 11747** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS ☒ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Stephen Paige

4/12/06

631 501 7210

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #