

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089621

Entity Name: ACTIVE REHAB, LLC

Current Principal Place of Business:

11509 LEDA LN
NEW PORT RICHEY, FL 34654

Current Mailing Address:

11509 LEDA LN
NEW PORT RICHEY, FL 34654 US

FEI Number: 59-3794554

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOOT, TIMOTHY
11509 LEDA LN
NEW PORT RICHEY, FL 34654 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

Authorized Person(s) Detail :

Title MGRM
Name DOOT, TIMOTHY
Address 11509 LEDA LN
City-State-Zip: NEW PORT RICHEY FL 34654

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TIMOTHY DOOT

MGRM

01/22/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date