

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000072080

Entity Name: THE APHASIA CENTER, LLC

Current Principal Place of Business:

6830 CENTRAL AVENUE SUITE A
ST. PETERSBURG, FL 33707

Current Mailing Address:

6830 CENTRAL AVENUE SUITE A
ST. PETERSBURG, FL 33707

FEI Number: 27-0620336

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARTELS-TOBIN, LORI R
6830 CENTRAL AVENUE
SUITE A
ST. PETERSBURG, FL 33707 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 BARTELS-TOBIN, LORI R
Address 6830 CENTRAL AVENUE SUITE A
City-State-Zip: ST. PETERSBURG FL 33707

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: LORI BARTELS-TOBIN

CEO

04/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date