

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000007362

Entity Name: COLONIAL HEALTH & REHAB, LLC

Current Principal Place of Business:

13730 WHISPERING LAKES LANE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

13730 WHISPERING LAKES LANE
PALM BEACH GARDENS, FL 33418

FEI Number:

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODOWICZ, JOSEPH S JR.
13730 WHISPERING LAKES LANE
WEST PALM BEACH, FL 33418 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 DARIGAN, ROBERT J
Address 834B WEST BEACH ROAD
City-State-Zip: CHARLESTOWN RI 02813

Title MGRM
Name RODOWICZ, CURTIS S JR.
Address 318 EAST HADDAM COLCHESTER
TURNPIKE
City-State-Zip: EAST HADDAM CT 06423

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: CURTIS RODOWICZ

PRESIDENT

03/19/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date