

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000244789

**Entity Name:** SYNERGY PERFORMANCE REHABILITATION LLC

**Current Principal Place of Business:**

13335 W HILLSBOROUGH AVE  
TAMPA, FL 33635

**Current Mailing Address:**

13335 W HILLSBOROUGH AVE  
TAMPA, FL 33635 US

**FEI Number: 88-3341590**

**Certificate of Status Desired:** Yes

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

W HILLSBOROUGH AVE, 13335  
13335 W HILLSBOROUGH AVE  
TAMPA, FL 33635 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:** 13335 W HILLSBOROUGH AVE

04/29/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            OWNER  
Name            MCDERMOTT, SHAWN  
Address        13335 W HILLSBOROUGH AVE  
City-State-Zip: TAMPA FL 33635

*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:** SHAWN MCDERMOTT

OWNER

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date