



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025

1. Corporate ID No. 000553420

2. Name of Corporation Symbria Rehab, Inc.

3. Street Address Principal Business Office:

No. and Street: 7125 JANES AVE
STE 300

City or Town: WOODRIDGE State: IL Zip: 60517 Country: USA

4. Business Phone No.

5. State of Incorporation

State: IL

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

621999

6. Brief Description of the Character of Business Conducted in Rhode Island

PROVISION OF REHABILITATION THERAPY SERVICES AND REHAB MANAGEMENT CONSULTING TO LONG TERM CARE FACILITIES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	JAMES STARK	28100 TORCH PARKWAY SUITE 600 WARRENVILLE, IL 60555 USA
SECRETARY	THOMAS J. KISER	28100 TORCH PARKWAY WARRENVILLE, IL 60555 USA
CEO	JILL M KRUEGER	28100 TORCH PARKWAY SUITE 600 WARRENVILLE, IL 60555 USA
DIRECTOR	DUANE TYLER	28100 TORCH PARKWAY SUITE 600 WARRENVILLE, IL 60555 USA
DIRECTOR	ALBERT WEISS	28100 TORCH PARKWAY SUITE 600 WARRENVILLE, IL 60555 USA
DIRECTOR	LISA COCHRANE	28100 TORCH PARKWAY SUITE 600 WARRENVILLE, IL 60555 USA
DIRECTOR	JAMES STARK	28100 TORCH PARKWAY SUITE 600 WARRENVILLE, IL 60555 USA
DIRECTOR	JILL M KRUEGER	28100 TORCH PARKWAY SUITE 600 WARRENVILLE, IL 60555 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	10,000.00	1400

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 14 Day of January, 2025 at 11:49:20 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By MELISSA VICK

Signature of Authorized Representative of the Corporation

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