# FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PO BOX 380546

**PROFIT** CORPORATION ANNUAL REPORT

1999

Principal Place of Business

1600 37TH ST

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

# DOCUMENT # **F93000005616**1. Corporation Name

HEALTHSOUTH OF TREASURE COAST, INC.

VERO BEACH FL 32960		Birmingham al 35238 US			DO NOT WRITE IN THIS SPACE						
us						3. Date Incorporated or Qualified					
		•				1 '	12/10/1993				ļ
2 Principal Pi	loco of Pusiness	2a. Mailing Address					FEI Number		$\neg \Gamma$	App	lied For
<u> </u>						1	63-1105921		H		Applicable
21   26						$\top$			\$8.	75 A	ditional
22						5. Certifcate of Status Desired Fee Required					
City & State City & State						6.	Election Campaign Financing				May Be
23 28							Trust Fund Contribution		Ac	ded to	Fees
Zip	Country	Zip				8.	This corporation owes the curre			,	<b>U</b>
24 25 29 30			<u> </u>	Personal Property Tax.					Ŭ Yes █No		
Name and Address of Current Registered Agent						10.	Name and Address of New R	Registered A	gent		
1	000000000000000000000000000000000000000		81	1	Name						
C T CORPORATION SYSTEM			82	82 Street Address (P.O. Box Number is Not Acceptable)							
1200 S. PINE ISLAND RD.				<u> </u>							
PLAI	NTATION FL 33324		83	1							
			84	1	City			FL	85	Zip C	ode
				Ļ			- the state and the state and the		hanai	na ito r	onistered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	a Statutes	5.	·						
SIGNATURE Signature, groad or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
Signature, typed or printed name of registered egent and title if applicable. (NOTE: Reg  12. OFFICERS AND DIRECTORS				int si	ignature requireu		DDITIONS/CHANGES TO OF		DIR	ECTO	RS IN 12
TITLE		ATTACHED DELETE	13.			-			□ CI		Addition
NAME		LIST	1.2 NAME								
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY		1.3 STREE		ODRESS						
	BIRMINGHAM AL		1.4 CITY-S								
CITY-ST-ZIP	VSD	ΓΊ DELETE	2.1 TITLE	31-2	-"					ange	Addition
NAME	TANNER, ANTHONY J		2.2 NAME								
1	A		2.3 STREE		nnpess						
STREET ADDRESS	BIRMINGHAM AL		2.3 STREE		ì						
CITY-ST-ZIP	VT	☐ DELETE ·	3.1 TITLE	31-2	<u> </u>		·		□ Cr	ange	Addition
1 :			3.2 NAME		1					-	
NAME	Martin, Michael D.   One Healthsouth Parkway		3.3 STREE		nnoess						
STREET ADDRESS	BIRMINGHAM AL		3.4. CITY-								
CITY-ST-ZIP		☐ DELETE	4,1 TITLE	31-2	<u> </u>				ПС	nange	Addition
TITLE	CD SCHOOL BICHARD M		4.1 III.E							<b>-</b>	_
NAME	SCRUSHY, RICHARD M										
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY		4.3 STREE								
CITY-ST-ZIP	BIRMINGHAM AL	☐ DELETE	4.4 CITY-S	ST-Z	ZIP				ПС	nange	Addition
TITLE	V	□ DEFC1F	5.1 TITLE 5.2 NAME		Į					ii.yc	
NAME	BOTTS, RICHARD E.		•								
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY		5.3 STREE								
CITY-ST-ZIP	BIRMINGHAM AL		5.4 CITY- S		ZIP						Addition-
TITLE		DELETE	6.1 TITLE		1				□ Ct	iange	☐ Addition

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is type and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, if on an attachment with an experience, with all other like empowered.

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90111 019 \*\*\*150.00

## HealthSouth of Treasure Coast, Inc.

DOCUMENT: F9300005616 List of Officers and Directors

### Officers:

Richard M. Scrushy - Chairman of the Board

James P. Bennett - President

Michael D. Martin – Vice President and Treasurer

Anthony J. Tanner - Vice President and Secretary

P. Daryl Brown - Vice President

Robert E. Thomson - Vice President

William T. Owens - Vice President

William W. Horton - Vice President and Assistant Secretary

Beall D. Gary, Jr. - Vice President and Assistant Secretary

C. Drew Demaray - Vice President and Assistant Secretary

Richard E. Botts – Sr. Vice President

Stacy H. Pulliam - Vice President, Assistant Treasurer and Assistant Secretary

#### Directors:

Richard M. Scrushy

James P. Bennett

Anthony J. Tanner

Michael D. Martin

All addresses c/o HEALTHSOUTH Corporation One HEALTHSOUTH Parkway Birmingham, Alabama 35243