

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000000703

Entity Name: NSC SARASOTA, INC.

FILED  
Apr 24, 2007  
Secretary of State

## Current Principal Place of Business:

ONE HEALTHSOUTH PARKWAY  
BIRMINGHAM, AL 35243

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 380546  
BIRMINGHAM, AL 35238

## New Mailing Address:

FEI Number: 58-2081028

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CPD ( ) Delete  
Name: GRINNEY, JAY  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: V ( ) Delete  
Name: MENKE, BRIAN M  
Address: ONE HEALTHSOUTH PKWY.  
City-St-Zip: BIRMINGHAM, AL 35243

Title: VSD ( ) Delete  
Name: DOODY, GREGORY L  
Address: ONE HEALTHSOUTH PKWY.  
City-St-Zip: BIRMINGHAM, AL 35243

Title: VD ( ) Delete  
Name: SNOW, MICHAEL D  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: V ( ) Delete  
Name: TARR, MARK  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: VT ( ) Delete  
Name: WORKMAN, JOHN  
Address: ONE HEALTHSOUTH PKWY.  
City-St-Zip: BIRMINGHAM, AL 35243

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: MCANDREWS, JAMES P  
Address: ONE HEALTHSOUTH PKWY.  
City-St-Zip: BIRMINGHAM, AL 35243

Title: VSD (X) Change ( ) Addition  
Name: WHITTINGTON, JOHN P  
Address: ONE HEALTHSOUTH PKWY.  
City-St-Zip: BIRMINGHAM, AL 35243

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AS (X) Change ( ) Addition  
Name: MARTIN, JODY  
Address: ONE HEALTHSOUTH PKWY  
City-St-Zip: BIRMINGHAM, AL 35243

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JODY MARTIN

AS

04/24/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date