

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

FILED
Jun 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 418708 (4)
1. Corporation Name
COMMUNITY PSYCHIATRIC CENTERS OF FLORIDA, INC.
Community Psychiatric Centers of Florida, Inc.



Principal Place of Business 5110 WEST SAHARA AVENUE LAS VEGAS NV 89102 US	Mailing Address 5110 WEST SAHARA AVE SUITE 118 LAS VEGAS NE 89102 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 400 W. Market St., Ste. 3300 City & State 23 Louisville, KY Zip 40202 Country US		2a. Mailing Address 26 Suite, Apt. #, etc. 400 W. Market St., Ste. 3300 City & State 28 Louisville, KY Zip 40202 Country US		3. Date Incorporated or Qualified 02/09/1973	
		4. FEI Number 59-1482073		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 Zip Code			
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LINDHEIMER, JACK H.	1.2 NAME	Director
STREET ADDRESS	5519 N ROSEMEAD BLVD	1.3 STREET ADDRESS	W. Bruce Lunsford
CITY-ST-ZIP	ROSEMEAD CA	1.4 CITY-ST-ZIP	400 W. Market St., Ste. 3300 Louisville, KY 40202
TITLE	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KOPTA, JULIA	2.2 NAME	Secretary
STREET ADDRESS	5110 W. SAHARA AVENUE	2.3 STREET ADDRESS	Joseph L. Landenwich
CITY-ST-ZIP	LAS VEGAS NV	2.4 CITY-ST-ZIP	400 W. Market St., Ste. 3300 Louisville, KY 40202
TITLE	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CONTE, RICHARD L	3.2 NAME	COO
STREET ADDRESS	5110 W. SAHARA AVENUE	3.3 STREET ADDRESS	Michael R. Barr
CITY-ST-ZIP	LAS VEGAS NV	3.4 CITY-ST-ZIP	400 W. Market St., Ste. 3300 Louisville, KY 40202
TITLE	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHIRES DANA L.	4.2 NAME	Director
STREET ADDRESS	2111 SWANN AVENUE	4.3 STREET ADDRESS	W. Earl Reed, III
CITY-ST-ZIP	TAMPA FL	4.4 CITY-ST-ZIP	400 W. Market St., Ste. 3300 Louisville, KY 40202
TITLE	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BIMPSON, WENDY L	5.2 NAME	Treasurer
STREET ADDRESS	5110 WEST SAHARA AVENUE	5.3 STREET ADDRESS	Richard A. Lechleiter
CITY-ST-ZIP	LAS VEGAS NV	5.4 CITY-ST-ZIP	400 W. Market St., Ste. 3300 Louisville, KY 40202
TITLE	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMAS, ROBERT L	6.2 NAME	Director
STREET ADDRESS	1144 MAINSAIL DR	6.3 STREET ADDRESS	Thomas T. Ladit
CITY-ST-ZIP	ANNAPOLIS MD	6.4 CITY-ST-ZIP	400 W. Market St., Ste. 3300 Louisville, KY 40202

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 true 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 changed, or on an attachment with an address.

SIGNATURE _____ Brian K. Wood 4/23/98 (502) 506-7300

CR2E034 (10/97)

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Louisville, KY 40202

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OFFICERS

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Jill L. Force Senior Vice President, General Counsel and Assistant Secretary

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

James H. Gillenwater, Jr. Senior Vice President, Planning and Development

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Thomas L. Grissom Vice President, Government Affairs

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Richard Gurka Senior Vice President, Mountain Region

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Cecelia A. Hagan Vice President, Human Resources

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Vincent S. Hambright Vice President, West Region

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Phillip D. Hurley Senior Vice President, Midwest Region

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Thomas T. Ladt Executive Vice President, Operations

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Joseph L. Landenwich Secretary

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Richard A. Lechleiter Vice President, Finance and Corporate Controller

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Maria M. Levering Senior Vice President, Corporate Services

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

W. Bruce Lunsford Chairman of the Board, President, and Chief Executive Officer

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Adrienne Lyons Vice President, Midwest Region

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Katheryn J. Markham Vice President, Information Systems

Primary Address: 400 West Market Street, Suite 3300
Louisville, KY 40202

Community Psychiatric Centers of Florida, Inc.

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Steven L. Monaghan Primary Address:	Vice President, Finance 400 West Market Street, Suite 3300 Louisville, KY 40202
Susan E. Moss Primary Address:	Vice President, Corporate Communications 400 West Market Street, Suite 3300 Louisville, KY 40202
Anne M. Nipp Primary Address:	Vice President, Southeast Region 400 West Market Street, Suite 3300 Louisville, KY 40202L. Mona
James J. Novak Primary Address:	Senior Vice President, Southeast Region 400 West Market Street, Suite 3300 Louisville, KY 40202
John V. Oliver Primary Address:	Vice President, Mountain Region 400 West Market Street, Suite 3300 Louisville, KY 40202
Bobby R. Palmer Primary Address:	Vice President, Central Region 400 West Market Street, Suite 3300 Louisville, KY 40202
Brian L. Pugh Primary Address:	Vice President, Program Development 400 West Market Street, Suite 3300 Louisville, KY 40202
W. Earl Reed, III Primary Address:	Chief Financial Officer and Executive Vice President 400 West Market Street, Suite 3300 Louisville, KY 40202
M. Suzanne Riedman Primary Address:	Vice President and Assistant General Counsel 400 West Market Street, Suite 3300 Louisville, KY 40202
T. Richard Riney Primary Address:	Assistant Secretary 400 West Market Street, Suite 3300 Louisville, KY 40202
Thomas M. Schuhmann Primary Address:	Vice President, Reimbursement 400 West Market Street, Suite 3300 Louisville, KY 40202
T. Stephen Turner Primary Address:	Senior Vice President, West Region 400 West Market Street, Suite 3300 Louisville, KY 40202
David R. Windhorst Primary Address:	Vice President, Financial Systems Development 400 West Market Street, Suite 3300 Louisville, KY 40202
Brian K. Wood Primary Address:	Vice President, Tax 400 West Market Street, Suite 3300 Louisville, KY 40202



America's Long-Term Healthcare Network

Vencor, Inc. 444 Fifth Avenue Louisville, Kentucky 40202 (502) 596-7300 (502) 596-4800 Fax

June 16, 1998

Florida Department of Revenue
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

RE: Community Psychiatric Centers of Florida, Inc.
Ref. Number: 418708

Dear Sir or Madam:

In response to the enclosed rejection letter dated May 12, 1998, we have made the necessary corrections to our annual report. We mistakenly changed the legal entity name on the report. We have changed the name back to the correct legal name. We apologize for any inconvenience this may have caused.

We trust this satisfies your requirements for acceptance of our annual report. However, if you have any questions or need additional information regarding this matter, please contact me at (502) 596-7284.

Sincerely,

VENCOR, INC.

Kimberly A. Guelda
Senior Tax Accountant

kag/njm

enclosures