**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

# 1999 DOCUMENT # 671739

1. Corporation Name

# Mar 29, 1999 8:00 am Secretary of State 03-29-1999 90005 042 \*\*\*150.00

	PAEDIC ASSOCIATES OF BR	Mailing Address									
ONE HEALTHSOUTH PARKWAY P.O. BOX 380546 BIRMINGHAM AL 35243 BIRMINGHAM AL 35238							50.107.11517	- 11 - 110	00405		
							DO NOT WRIT	E IN THIS	SPACE		7
						3	. Date Incorporated or Qualifed				
La Maria Address							06/01/1980 FEI Number		- ( )	Applied For	┨
— ·	lace of Business	2a. Mailing Address	To			*	59-1997926			Not Applicable	┨
21 Suita Ant	# oto	Suite, Apt. #, etc.			+	<u> </u>			Additional	1	
Suite, Apt.	#, etc.	27			5	. Certifcate of Status Desired			Required		
22 City & Stat		City & State				6	. Election Campaign Financing		\$5.0	0 May Be	1
23		28				-	Trust Fund Contribution			d to Fees	ļ
Zip	Country	Zip Country				8	. This corporation owes the curre	nt year Inta	ngible		1
24	25	29	30				Personal Property Tax.		☐ Yes	∏No	
,	9. Name and Address of Current	Registered Agent				10	). Name and Address of New Ro	gistered /	Agent		4
				81	Name						
CT CORPORATION SYSTEM				82	Street Addr	Street Address (P.O. Box Number is Not Acceptable)					┪
1200 SOUTH PINE ISLAND ROAD						, ,					1
PLA	NTATION FL 33324			83							
~				84	City				85 Z	ip Code	1
	7				•			FL		·	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State o	and 607.1508, Florida Statute	s, the a	bove	-named corp	oratio	on submits this statement for the property of directors. I hereby accept	urpose of	changing	its registered	
office or r agent. I a	egistered agent, or both, in the State o im familiar with, and accept the obligation	ons of, Section 607.0505, Flor	da Stat	utes.	ine corporaii	J11 5 11	obaid of directors. Thereby accept	uis appoi	idiricin us	rogistorou	
SIGNATURE	,										ļ
SIGNATURE	Signature, typed or printed name of registered agent		_	l Agen	t signature require			DATE	5 5.55	TODO 111 40	- 3
12.	OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFF	ICERS AN	Chanc		-} ;
TITLE	CO *SEE ATTACHED LIST □ DELETE			1.1 TITLE					□ Glaik	le ("I vaginoii	13
NAME	SCRUSHY, RICHARD M				2 NAME						
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY				3 STREET ADDRESS						1 !
CITY-ST-ZIP	BIRMINGHAM AL 35243		1.4 CITY		-ZIP				☐ Chang	ie Addition	- 1
TILE	P DELETE		1	2.1 TITLE					L comi	de Programi	
NAME	BROWN, P. DARYL		2.2 NAME 2.3 STREET ADDRESS					-			
STREET ADDRESS	f		1								
CITY-ST-ZiP	BIRMINGHAM AL 35243			2.4 CITY-ST-ZIP					☐ Chang	e Addition	4
TITLE	VSD DELETE			3.1 TITLE					~	,- <u> </u>	-
NAME	TANNER, ANTHONY J			3.2 NAME							
STREET ADDRESS	DIDAMACO LARA AL OCCAC			3.3 STREET ADDRESS							
CITY-ST-ZIP	BIRMINGHAM AL 35243  VT □ DELETE			3.4. CITY-ST-ZIP 4.1 TITLE					☐ Chan	e Addition	1
TITLE	VT	- DELETE	4.1 IIIL							,,,	ĺ
NAME	MARTIN, MICHAEL				ADDRESS						
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY										
CITY-ST-ZIP			4 CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·		Chan	e Addition	1	
TITLE	VD REMNETT JAMES D		5.1 IIILE 5.2 NAME								1
NAME	BENNETT, JAMES P SS ONE HEALTHSOUTH PARKWAY			5.3 STREET ADDR							
STREET ADDRESS	+ ·= · ·= · ·= · · · · · · · · ·		5.4 CITY-S								
CITY-ST-ZIP TITLE	BIRMINGHAM AL 35243  V □ DELETE			6.1 TITLE					Chang	e Addition	1
NAME	BOTTS, RICHARD E			6.2 NAME						· •	-
STREET ADDRESS				6.3 STREET ADDRESS							1
	) ONE HEALTHSOLITH PARKWAY	1	6.3 S	TREET	ADDRESS						ì
CITY-ST-ZIP	ONE HEALTHSOUTH PARKWAY BIRMINGHAM AL 35243	1		TREET						;	

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, with all the relief of the corporation or the receiver or trustee empowered.

SIGNATURE:

## ORTHOPEDIC ASSOCIATES OF BROWARD, INC.

DOCUMENT: 671739

List of Officers and Directors

500-671739 267109-90005-42

## Officers:

Richard M. Scrushy - Chairman of the Board

P. Daryl Brown - President

James P. Bennett - Vice President

Michael D. Martin – Vice President and Treasurer

Anthony J. Tanner – Vice President and Secretary

James P. Bennet - 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

Leif M. Murphy - Vice President

#### Directors:

Richard M. Scrushy James P. Bennett

Anthony J. Tanner

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