FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

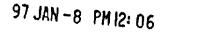
Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A20338

FILED DIVISION OF CORPORATIONS





IEALTHSOUTH SPORTS ME ER OF JACKSONVILLE LIM	DICINE & REHABILITA ITED PARTNERSHIP	TION C	EN	! 10010H 1111 HUH FOIGH HIRA		1847 81847 81811 81811 1	
Mailing Address POST OFFICE BOX 380546 BIRMINGHAM AL 35238	Principal Office Address 4237 SALISBURY ROAD SUITE 401 JACKSONVILLE FL 32216			3. Date Formed or Registered 07/12/1985 3a. Date of Last Report 01/09/1996		5a. Capital Contributions as Shown on record. \$345,000.00 5b. Amount of Capital Contributions in FLORIDA	
OF THE SOCIAL PLE SOCIAL PROPERTY OF THE SOCI							
Mailing Address 28. Principal Office Address				tate or Country of Formation	Contributions in FLORIDA to date:		
				AL		\$16,000.00	
uite, Apt. #, etc.	Suite, Apt. #, etc.		6. F	El Number 59-2543 124	13124 Applied For		
ity & State	City & Stale		7.0	ertificate of Status Desired	Not Applicable		
ip Country	Zip Country			7. Certificate of Status Desired \$8.75 Addition. Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee inform			
						:	
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office Name					
C T CORPORATION SYSTEM							
1200 S. PINE ISLAND ROAD		Street Address (P.O. Box Number Is Not Acceptable)					
PLANTATION FL 33324	Suite, Apt. #,		⊭, etc.	etc01/16/9701088028			
	City		······································	****250.75 ****250.75 FL Zip Code			
IGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THA	T IS A CORPORATION,	LIMITED	PARTNEI	DATE		NESS ENTIT	
MU 11. Name(s) of General Partner(s)	ST BE REGISTERED AN	ND ACTIV	/E WITH T	HIS OFFICE.	11c.	Registration/	
	11a. (Do NOT Use Post Office Box Numbers) 1 PERIMETER PARK SOUT		BIRMINGHAM AL 35243			Document Number	
HEALTHSOUTH REHAB CORP					P02374		
					at a	15	
Note: General partners MAY No. 12. I do hereby certify that the information supplied w							
Corporations from any liability of non-compliance this annual report is true and accurate and that me	with Section 119.07(3)(k) in the event that the	information supp	illed is deemed exe	empt from public access. I furth	er certify that the	he information indicated	

Typed or Printed Name of General Partner Signing Form Richard E. Botts, Group Vice

Daytime Telephone Number (205) 969 -7595