## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



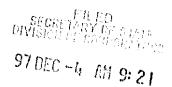
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A27270** 



(205) 967-7116

Daytime Telephone Number .



PHYSICIANS SURGERY CENTER, LTD.				
Mailing Address  (USA WORKING MICKEN YOUR X XXIIX OF CX X  (MARITULLAR (WORKING X X X X X X X X X X X X X X X X X X X	Principal Office Address  **MONNIAN SWONN SWONN SWONN NO. N.		3. Date Formed or Registered 10/25/1988 3a. Date of Last Report 01/02/1997	5a. Capital Contributions as Shown on record.  \$360,000.00  5b. Amount of Capital Contributions in FLORIDA to date
2. Malting Address 2 O BOX 380546 Sulte, Apt. #, etc. 3IRMINGHAM, AL 35238 City & State			4. State or Country of Formation     FL     6. FEI Number     59-2924183	Applied For Not Applicable
Zip Country	Zip Country		7. Certificate of Status Desired  8. Make check payable to: Dept. of	\$8.75 Additional Fee Required  State (See reverse side for fee information
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  10a. Pursuant to the provisions of sections 620.1051 for the purpose of changing its registered office agent. I am familiar with, and accept the obliga  SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THA	e or rogistered agont, or both, in the State of Fli tions of section 620.192, Florida Statutes.	Suite, Apt. #, el. City  od linited partnersh	c. 非常来[ ip organized or registered under the laws of the was authorized by its general partner(s). I here	FL Zip Code  F Lorida, submits this statement of registered
11. Name(s) of General Partner(s)	ST BE REGISTERED AN  11a. Address of Each Gener (Do NOT Use Post Office B	-I Danta	WITH THIS OFFICE.  1b. City, State & Zip Code	11c. Registration/
SCA-FT. MYERS, LLC LIMITED C	ANG HEALTHSOUTH PA	KAKX :	X <b>NASHANKE YN X7206</b> BIRMINGHAM, AL 35243	M9400000169
Note: General partners MAY No	OT be changed on this for	m: an amen	dment must be filed to cha	ange a general partner.

12. I do hereby certify that the Information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of

RICHARD E. BOTTS, VP TAX

Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that i am a General Partner of the limited partnership, receiver or trustee