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 # **A31162**

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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10a, Pursuant to the provisions of sections 620 100.1 and 620 132, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this state of the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent, an amount of the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent, accepting Appointment). A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. Registrator/ Document Number HEALTHSOUTH REHAB. CORP. NOT PERMISTER SEC. CIVE REACTIFISOUTH PARKWAY Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner 12. I do hereby certify that the information supplied with this filing is youndarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of ney dynaphiance with Section § 20.7(3)(k) in the overall my dis information supplied is deemed except if computing accepts in the third propriety in the propriety in the propriety of the information indicate this annual reports in the and accepts and that her generately file through the accept in the public access. I further certify that the information indicate this annual reports in the annual reports to the accept in computing a computer of the limited partnership, receive or the empowered to execute this increase and accepts and that the information indicate this annual reports to the accept in the propriety of the partnership.						1		
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PLANTATION FL 33324 Sulle, Apt. #, etc. ####278, 75 ####278, 75 City FL Zrp Code 10a, Pursuent to the provisions of sections 620 1051 and 620, 192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this staten for the purpose of changing its registered depend on the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registe signer. I am familiar with, and accept the obligations of section 620, 192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) HEALTHSOUTH REHAB. CORP. PARCHARD PARKWAY NOTE PARKWAY NOTE PARKWAY NOTE PARKWAY BIRMINGHAM AL 35243 P02374 P02374 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner partn	1200 S. PINE ISLAND ROAD							
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