2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F0000003977

FILED
May 16, 2001 8:00 am
Secretary of State

REHABCARE GROUP THERAPY SERVICES, INC.								05-16-2001 90234 044 ***150.00						
Principal Plac 733 FORSYTH T. LOUIS MO	BLVD SUIT		Mailing Address 7733: FORSYTH BLVD SUITE 1700 ST. LOUIS MO 63105					80056807						
2. Principal f	Place of Busi	iness	3. Mailing	Mailing Address										
Suite, Apt	. #, etc.		Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE						
City & Sta	te		City &	State	<u></u> ,	- 1	4. FEI Number 43-1592574 Applied F							
Zip	~	_ Country	Zip Cour			try	5. Certificate of Status Desired				\$8.75 Additional Fee Required			
	6. Name	e and Address of Current	Registered /	gent		7. Name and Address of New Registered Agent								
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324						Name Street Address (P.O. Box Number is Not Acceptable)								
						City		FL Zip Code						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) FILE NOW! After MAY 1, 20 Make Check Payab						IS \$150.6 will be \$5	00 550.00 t of State							
11.	T.	OFFICERS AND	DIRECTORS		12.				S/CHANGI	S TO OFF	ICERS AND			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1200 LEW	, gregory f /is spring drive Field mo 63005		☐ Delete			gres sola	n Her 133	derso Fors	n yth Mo	BNd.	Change Stev	Addition 700	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	10771 RO	ELLER, JOHN R IXANNA DRIVE S MO 63128		Delete	1		ove 77	gory	_		auer Blyd			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	727 VISTA	T, JAMES M A HILLS COURT MO 63025		☐ Delete								☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		EPHEN J SFORD LN FIELD MO 63005		☐ Delete								☐ Change	Addition	
ITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		T ADDRESS ST-ZIP						☐ Change	Addition	
TITLE IAME STREET ADDRESS STY-ST-ZIP				☐ Delete		T ADDRESS ST-ZIP	,					☐ Change	☐ Addition	
3. I hereby o	ertify that th	e information supplied with	this filing doe	es not qualify fo	or the exen	nption state	ed in Sectio	n 119.07(3	3)(i), Florida	Statutes.	I further certi	fy that the ir	formation	

indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Following is the list of officers and directors for RehabCare Group Therapy Services, Inc.

OFFICERS

Alan C. Henderson – President & CEO 7733 Forsyth Blvd. Ste. 1700 St. Louis, MO 63105

Gregory F. Bellomy – President & Chief Operating Officer 7733 Forsyth Blvd. Ste. 1700 St. Louis, MO 63105

James M. Douthitt – Senior VP, CAO, Treasurer & Asst. Secretary 7733 Forsyth Blvd. Ste. 1700 St. Louis, MO 63105

Gregory J. Eisenhauer – Senior VP & CFO 7733 Forsyth Blvd. Ste. 1700 St. Louis, MO 63105

DIRECTORS

Alan C. Henderson 7733 Forsyth Blvd. Ste. 1700 St. Louis, MO 63105

Gregory J. Eisenhauer 7733 Forsyth Blvd. Ste. 1700 St. Louis, MO 63105

Stephen J. Toth 7733 Forsyth Blvd. Ste. 1700 St. Louis, MO 63105