## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## May 05, 2004 8:00 am Secretary of State DOCUMENT # F93000000861 1. Entity Name 05-05-2004 90236 047 \*\*\*150.00 DIAGNOSTIC HEALTH CORPORATION Principal Place of Business Mailing Address ONE HEALTHSOUTH PARKWAY P.O. BOX 380546 14021876 **BIRMINGHAM AL 35243 BIRMINGHAM AL 35238** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State Applied For City & State 4. FEI Number 63-1059483 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition GORDON, JOEL C NAMÉ NAME SCREET ADDRESS ONE HEALTHSOUTH PARKWAY STREET ADDRESS **BIRMINGHAM AL 35243** CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change TITLE ☐ Addition NÄME DEMARAY, C. DREW NAME STREET ADDRESS ONE HEALTHSOUTH PARKWAY STREET ADDRESS CITY-ST-7IP **BIRMINGHAM AL 35243** CITY-ST-ZIP VTD Delete ☐ Change TITLE VΡ TITLE Addition GUY SANSONE ONE HEALTHSOUTH PARKWAY NAME HORTON, WILLIAM T NAME STREET ADDRESS STREET ADDRESS ONE HEALTHSOUTH PARKWAY BIRMINGHAM, AL CITY-ST-ZIP CITY-ST-ZIP 352433 **BIRMINGHAM AL 35243** VO VΡ **I** Delete TITLE TITLE ☐ Change ■XAddition BOTTS, RICHARD E NAME NAME BRIAN M MENKE ONE HEALTHSOUTH PARKWAY ONE HEALTHSOUTH PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BIRMINGHAM AL 35243 CITY-ST-ZIP BIRMINGHASM, AL 35243 VPSD TITLE KJ Delete TITLE ☐ Change **□**XAddition HALE, BRANDON O 11 NAME GREGORY L DOODY ONE HEALTHSOUTH PARKWAY STREET ADDRESS STREET ADDRESS ONE HEALTHSOUTH PARKWAY **BIRMINGHAM AL 35243** CITY-ST-ZIP CITY-ST-ZIP BIRMINGHAM, AL 35243 TITLE Delete TIT! F ☐ Change ☐ Addition MAY, ROBERT P NAME NAME ONE HEALTHSOUTH PARKWAY STREET ADDRESS STREET ADDRESS **BIRMINGHAM AL 35243** CITY-ST-ZIP CITY-ST-ZIP

**FILED** 

Daytime Phone #

12. 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all others have the empowered. BRIAN M MENKE 205/967-7116 SIGNATURE: <

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Juliachment 14021876 # F930000086

Diagnostic Health Corporation

## Officers & Directors

Joel C. Gordon Chairman of the Board and Director

Robert P. May President and Director

Gregory L. Doody Secretary

Guy Sansone Vice President Treasurer and Director

Larry D. Taylor Vice President

Patrick A. Foster Vice President

Karen Davis Vice President

C. Drew Demaray Vice President and Assistant Secretary

Beall D. Gary, Jr. Vice President and Assistant Secretary

Brian M. Menke Vice President

C/O Healthsouth Corporation One Healthsouth Parkway Birmingham, AL 35243