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FILED
Apr 08, 2005 8:00 am
Secretary of State

PLEASE READ ALL INSTRUCTIONS BEFORE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F93000001119**

1. Corporation Name
SCA - Citrus, Inc.

2. Principal Office Address One Healthsouth Parkway Suite, Apt. #, etc.		3. Mailing Office Address P.O. Box 380546 Suite, Apt. #, etc.	
City & State Birmingham, Alabama		City & State Birmingham, AL	
Zip 35243	Country Jefferson	Zip 35238	Country Jefferson

REINSTATEMENT 02-05

MRS

4. Date Incorporated or Qualified To Do Business in Florida 02/23/1993	
5. FEI Number 62-1516306	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name
CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #, Etc.

City
Plantation,

000051195400
04/19/05--01021--013 **1208.75

State
FL Zip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent *Joan Bolden* **JOAN BOLDEN** Date **4/6/05**

REGISTERED AGENT MUST SIGN **ASSISTANT SECRETARY**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	SEE ATTACHED LIST		

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE *Bian M. Menke* **Bian M. Menke- Vice Pres.** Date **4/4/05** (205)967-7116

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E081 (01/05)

2022

SCA - Citrus, Inc.
Officers and Directors

Officers & Directors

Jay Grinney	Chairman of the Board, President and Director
Michael D. Snow	Vice President, Treasurer and Director
Gregory L. Doody	Vice President, Secretary and Director
John Workman	Vice President and Chief Financial Officer
Diane L. Munson	Vice President
C. Drew Demaray	Vice President and Assistant Secretary
Lucy C. Hicks	Vice President
Robert M. Wisner	Vice President
Brian M. Menke	Vice President
Randall M. Mink	Vice President
Arthur E. Wilson, Jr.	Vice President
Judy Dean	Vice President
Mark Tarr	Vice President

All business addresses c/o
HEALTHSOUTH Corporation
One Healthsouth Parkway
Birmingham, Alabama 35243
Telephone (205) 967-7116