

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **F93000001522 (2)**

1. Corporation Name
PPMC, INC.

Principal Place of Business
**ONE HEALTHSOUTH PARKWAY
BIRMINGHAM AL 35243
US**

Mailing Address
**PO BOX 380546
BIRMINGHAM AL 35238
US**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/26/1993

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		63-1071721		Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VSD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TANNER, ANTHONY J	1.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	1.4 CITY-ST-ZIP	
TITLE	COB	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCRUSHY, RICHARD M	2.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	2.4 CITY-ST-ZIP	
TITLE	VTD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEAM, AARON JR.	3.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	3.4 CITY-ST-ZIP	
TITLE	VS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEMARAY, C. DREW	4.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOTTS, RICHARD E.	5.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	5.4 CITY-ST-ZIP	
TITLE	TS	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PULLIAM, STACY H.	6.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Handwritten Signature]

3/2/98

(705) 917-7116

CR2E034 (10/97)