

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000003002

1. Entity Name

SHC CENTRAL FLORIDA, INC.

Principal Place of Business  
ONE HEALTHSOUTH PARKWAY  
BIRMINGHAM AL 35243  
US

Mailing Address  
P.O. BOX 380546  
BIRMINGHAM AL 35238  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 58-2056218

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
C/O CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CD ☐ Delete  
NAME SCRUSHY, RICHARD M  
STREET ADDRESS ONE HEALTHSOUTH PARKWAY  
CITY-ST-ZIP BIRMINGHAM AL

TITLE CPD ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME BENNETT, JAMES P  
STREET ADDRESS ONE HEALTHSOUTH PARKWAY  
CITY-ST-ZIP BIRMINGHAM AL 35243

TITLE VTD ☐ Change ☒ Addition  
NAME Owen, William T.  
STREET ADDRESS One HEalthsouth Pkwy.  
CITY-ST-ZIP Birmingham, AL 35243

TITLE VSD ☐ Delete  
NAME HALE, BRANDON O  
STREET ADDRESS ONE HEALTHSOUTH PARKWAY  
CITY-ST-ZIP BIRMINGHAM AL 35243

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME BOTTS, RICHARD E  
STREET ADDRESS ONE HEALTHSOUTH PARKWAY  
CITY-ST-ZIP BIRMINGHAM AL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VT ☒ Delete  
NAME MARTIN, MICHAEL D.  
STREET ADDRESS ONE HEALTHSOUTH PARKWAY  
CITY-ST-ZIP BIRMINGHAM AL

TITLE V ☐ Change ☒ Addition  
NAME Thompson, Robert E.  
STREET ADDRESS One HEalthsouth Pkwy,  
CITY-ST-ZIP Birmingham, AL 35243

TITLE P ☐ Delete  
NAME FOSTER, PATRICK A  
STREET ADDRESS ONE HEALTHSOUTH PARKWAY  
CITY-ST-ZIP BIRMINGHAM AL 35243

TITLE V ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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:

Richard E. Botts

4/26/01

205-967-7116

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
May 14, 2001 8:00 am  
Secretary of State

05-14-2001 90083 018 \*\*\*150.00

C0064083



DO NOT WRITE IN THIS SPACE

0565204

CR2E034 (10/00)