2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**



Apr 11, 2003 8:00 am Secretary of State F94000003336 DOCUMENT # 04-11-2003 90188 034 ***150.00 1. Entity Name KINDRED REHAB SERVICES, INC. Mailing Address Principal Place of Business 680 SOUTH FOURTH STREET 680 SOUTH FOURTH STREET 20029067 ATTN: TAX DEPARTMENT ATTN: TAX DEPARTMENT LOUISVILLE KY 40202 LOUISVILLE KY 40202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 33-0359338 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired_ 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 ROAD PLANTATION FL 33324 Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. X Addition TITLE TITLE Director Change X Delete James H. Gillenwater 680 South Fourth Street LUNSFORD, BRUCE W NAME NAME 400 WEST MARKET STREET, SUITE 3300 STREET ADDRESS STREET ADDRESS Louisville, KY 40202 LOUISVILLE KY 40202 CITY-ST-ZIP CITY-ST-ZIP Vice President TITLE COO Delete TITLE Change **▲** Addition David R. Windhorst NAME BARR, MICHAEL R NAME 680 South Fourth Street 400 WEST MARKET STREET, SUITE 3300 STREET ADDRESS STREET ADDRESS Louisville, KY 40202 CITY-ST-ZIP LOUISVILLE KY 40202 CITY-ST-ZIP CFO TITLE President ☐ Change X Addition X Delete TITLE Paul J. Diaz REED, EARL W III NAME NAME 680 South Fourth Street STREET ADDRESS 400 WEST MARKET STREET, SUITE 3300 STREET ADDRESS Louisville, KY 40202 CITY-ST-ZIP LOUISVILLE KY 40202 CITY-ST-7IP Vice President, Tax VΡ X Delete Anddition Change TITLE TITLE Hank Robinson FORCE, JILL L NAME NAME 680 South Fourth Street 400 WEST MARKET STREET, SUITE 3300 STREET ADDRESS STREET ADDRESS Louisville, KY 40202 CITY-ST-ZIP LOUISVILLE KY 40202 CITY-ST-ZIP Treasurer Change ★ Addition TITLE TITLE X Defete FADT, THOMAS T Richard A. Lechleiter NAME NAME 680 South Fourth Street 400 WEST MARKET STREET, SUITE 3300 STREET ADDRESS STREET ADDRESS Louisville, KY 40202 **LOUISVILLE KY 40202** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition LANDENWICH, JOSEPH L NAME NAME 400 WEST MARKET STREET, SUITE 3300 STREET ADDRESS STREET ADDRESS 680 South Fourth Street

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

LOUISVILLE KY 40202

Simolikovasaured

Hank Robinson 4/2/2003

FILED

Attachment 2000900-1 #F9400003336

Kindred Rehab Services, Inc.

DIRECTORS

James H. Gillenwater, Jr.

Director

Primary

680 South Fourth Avenue

Address:

Louisville, KY 40202

M. Suzanne Riedman

Director

Primary Address: 680 South Fourth Avenue Louisville, KY 40202

Richard A. Lechleiter

Director

Primary Address:

680 South Fourth Avenue

Louisville, KY 40202

Kimberly A. Beach

Director

Primary Address:

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OFFICERS

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President, Hospital Division

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Stephen M. Dobler

Vice President, I/S and Administration

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Kindred Rehab Services, Inc.

Attachment 30

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Kindred Rehab Services, Inc.

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