

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000005646

1. Entity Name
CMS REHAB CONCEPTS CORP.

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90021 017 ***550.00

Principal Place of Business

ONE HEALTHSOUTH PKWY
BIRMINGHAM AL 35243
US

Mailing Address

P O BOX 380546
BIRMINGHAM AL 35238
US

A0071834

2. Principal Place of Business

One Healthsouth Parkway

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 380546

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Birmingham, AL

Zip

35243

Country

US

City & State

Birmingham, AL

Zip

35238

Country

US

4. FEI Number

25-1650793

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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

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

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE	DC	<input type="checkbox"/> Delete
NAME	SCRUSHY, RICHARD M	
STREET ADDRESS	ONE HEALTHSOUTH PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35243	
TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	BENNETT, JAMES P	
STREET ADDRESS	ONE HEALTHSOUTH PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35243	
TITLE	DVS	<input type="checkbox"/> Delete
NAME	TANNER, ANTHONY J	
STREET ADDRESS	ONE HEALTHSOUTH PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35243	
TITLE	VT	<input type="checkbox"/> Delete
NAME	MARTIN, MICHAEL D	
STREET ADDRESS	ONE HEALTHSOUTH PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35243	
TITLE	V	<input type="checkbox"/> Delete
NAME	BOTTS, RICHARD E	
STREET ADDRESS	ONE HEALTHSOUTH PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35243	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	BROWN, P D	
STREET ADDRESS	ONE HEALTHSOUTH PKWY	
CITY-ST-ZIP	BIRMINGHAM AL 35243	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brandon O. Hale	
STREET ADDRESS	One Healthsouth Parkway Birmingham, AL	
CITY-ST-ZIP		
TITLE	DVT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	William T. Owens	
STREET ADDRESS	One Healthsouth Parkway	
CITY-ST-ZIP	Birmingham, AL 35243	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 information.

SIGNATURE:

Richard E. Botts
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard E. Botts

Date

Daytime Phone #

2/31/00 205-967-7116

CR2E034 (5/00)