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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000000617

1. Corporation Name

FIRST REHAB, INC.

						1111 e 211 e 211 e 1	HARI MANIMAN	
Principal Place of Business Mailing Address						#111 ##11# #11#1	11811 1881 1881	
		400 W. MARKET ST STE 3300						
LOUISVILLE KY 40202 LOUISVILLE KY 40202					DO NOT WRITE IN THIS SPACE			
US US					3. Date Incorporated or Qualifed			
					02/06/1995			
2. Principal Place of Business One Vencor Place 2a. Mailing Address One Vencor					4. FEI Number	Ap	plied For	
21 680 South Fourth Street 26 680 South Four		26 680 South Fourth	h Street		91-1657948	No	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc	•		5. Certificate of Status Desired	\$8.75 △		
27					5. October 5. States 550.00	Fee Re	quired	
City & State		City & State			6. Election Campaign Financing	\$5.00	,	
Louisville, KY		Louisville, KY			Trust Fund Contribution	Added to	o Fees	
Zip	Country	_ '	Country		8. This corporation owes the current year Inta			
4 0202-24	<u> </u>	29 40202-2412 30	<u>us</u>	A	Personal Property Tax.		□No	
Name and Address of Current Registered Agent					10. Name and Address of New Registered	\gent		
C T CORPORATION SYSTEM			81	Name				
1200 SOUTH PINE ISLAND ROAD			82	Street A	Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324			83					
	•		_	0.11		7:- (Cada	
			84	City	FL	85 Zip C	Jode	
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								
				ared Agent signature required when reinstating) DATE 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.	1		☐ Change	Addition	
TITLE	D	**			See Attached List	ondrigo	A radian	
NAME	W. BRUCE LUNSFORD		1.2 NAME					
STREET ADDRESS	400 W. MARKET ST. STE 3300	1		ADDRESS			l	
CITY-ST-ZIP			1.4 CITY-S	T- ZIP		Change	☐ Addition	
TITLÉ	D DATE D DATE	Λ	2.1 TITLE	[See Attached List		X Addition	
NAME	MICHAEL R. BARR	2.2 N		ĺ				
STREET ADDRESS	400 W. MARKET ST STE 3300	B Comment		ADDRESS			(
CfTY-ST-ZiP	LOUISVILLE KY		2. 4 CITY- S	T-ZIP		[TtChoogo	T Addition	
TITLE	VP	4	3.1 TITLE			Change	M Vaginoir	
NAME	JILL L. FORCE	1	3.2 NAME	İ			ŀ	
STREET ADDRESS	100 111 111 111 111			ADDRESS	One Vencor Place, 680 South Fourth Street			
CITY-ST-ZIP			3 4. CITY-S	T-ZIP		Chanca	Addition	
TITLE	VP	_	4.1 TITLE			X Change		
NAME	THOMAS M. SCHUHMANN		4. 2 NAME]				
STREET ADDRESS	400 W. MARKET ST STE 3300			ADDRESS	One Vencor Place, 680 South Fourt	h Street		
CITY-ST-ZIP	LOUISVILLE KY		4.4 CITY-S	T-ZIP		Charca	□ Additi	
TITLE	VP	☐ DELETE	5.1 TITLE	1		🙀 Change	☐ Addition	

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, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

DAVID R. WINDHORST

LOUISVILLE KY

LOUISVILLE KY

400 W MARKET ST, STE 3300

JAMES H. GILLENWATER JR.

400 W MARKET ST, STE 3300

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

One Vencor Place, 680 South Fourth Street

One Vencor Place, 680 South Fourth Street

(502) 596-7300

Change

Addition

54668**0**-90007-48 #F95000000617

First Rehab, Inc.

Tuesday, February 09, 1999

DIRECTORS:

Jill L. Force

Director

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

James H. Gillenwater, Jr.

Director

Primary Address: One Vencor Place, 680 South Fourth Street

Louisville, KY 40202-2412

Richard A. Schweinhart

Director

Primary

One Vencor Place, 680 South Fourth Street

Address: Louisville, KY 40202-2412

OFFICERS:

William M. Altman

Vice President, Compliance

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

Frank W. Anastasio

President, Ancillary Services

Primary

One Vencor Place, 680 South Fourth Street

Address:

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Frank J. Battafarano

President, Hospital Division

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

Richard E. Chapman

Senior Vice President, Information Systems

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

J. Guy Conces

Vice President, Clinical/Business Systems Development

Primary

One Vencor Place, 680 South Fourth Street

Address:

First Rehab, Inc.

R. John Cowgill

Vice President, Facilities Management 546080 -90007 #F950000006

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

Donald D. Finney

President, Nursing Center Division

Primary

One Vencor Place, 680 South Fourth Street

Address:

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Jill L. Force

Senior Vice President, General Counsel and Secretary

Primary

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Address:

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James H. Gillenwater, Jr.

Senior Vice President, Planning and Development

Primary

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Address:

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Thomas L. Grissom

Vice President, Government Affairs

Primary

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Address:

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Richard Gurka

Senior Vice President, Central Region

Primary

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Address:

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Cecelia A. Hagan

Vice President, Human Resources

Primary

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Address:

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Vincent S. Hambright

Senior Vice President, Pacific Region

Primary '

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

Edward L. Kuntz

Chief Executive Officer and President

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

Joseph L. Landenwich

Assistant Secretary

Primary

One Vencor Place, 680 South Fourth Street

Address:

First Rehab, Inc.

Richard A. Lechleiter

Vice President, Finance and Corporate Controller 546 680 -9007-48

South Fourth Street 4F9500000617

2-2412

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

Katheryn J. Markham

Vice President, Information Systems

Primary

One Vencor Place, 680 South Fourth Street

Address:

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Steven L. Monaghan

Senior Vice President, Midwest Region

Primary '

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Address:

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Susan E. Moss

Vice President, Corporate Communications

Primary

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Address:

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Anne M. Nipp

Senior Vice President, South Region

Primary

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Address:

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James J. Novak

Senior Vice President, Southeast Region

Primary

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Address:

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John V. Oliver

Senior Vice President, Southwest Region

Primary

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Address:

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Bobby R. Palmer

Senior Vice President, Mid America Region

Primary

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Address:

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Brian L. Pugh

Senior Vice President, North Region

Primary

One Vencor Place, 680 South Fourth Street

Address:

First Rehab, Inc.

M. Suzanne Riedman

Vice President and Assistant General Counsel

Primary

One Vencor Place, 680 South Fourth Street

Address:

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49500000619

Thomas M. Schuhmann

Vice President, Reimbursement

Primary

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Address:

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Richard A. Schweinhart

Senior Vice President and Chief Financial Officer

Primary

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Address:

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T. Stephen Turner

Senior Vice President, West Region

Primary

One Vencor Place, 680 South Fourth Street

Address:

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David R. Windhorst

Vice President, Financial Systems Development

Primary

One Vencor Place, 680 South Fourth Street

Address:

Louisville, KY 40202-2412

Brian K. Wood

Vice President, Tax

Primary

One Vencor Place, 680 South Fourth Street

Address: