## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## May 05, 2004 8:00 am Secretary of State **DOCUMENT # F95000001299** 1. Entity Name 05-05-2004 90236 009 \*\*\*150.00 HSC OF FT. PIERCE, INC. Mailing Address Principal Place of Business ONE HEALTHSOUTH PARKWAY P O BOX 380546 14021867 **BIRMINGHAM AL 35238 BIRMINGHAM AL 35243** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 58-2088823 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD PLANTATION FL 33324 City Zip Code FL 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition TITLE ☐ Delete TITLE GORDON, JOEL C NAME NAME ONE HEALTHSOUTH PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL 35243** CITY-ST-ZIP PD ☐ Delete Change ☐ Addition TITLE TITLE MAY, ROBERT P NAME NAME ONE HEALTHSOUTH PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL 35243** CITY-ST-ZIP ☐ Change X Addition X Delete TITLE VSD NAME HALE, BRANDON O NAME GREGORY L DOODY STREET ADORESS STREET ADDRESS ONE HEALTHSOUTH PKWY ONE HEALTHSOUTH PARKWAY CITY-ST-ZIP CITY-ST-7IP **BIRMINGHAM AL 35243** BIRMINGHAM, AL 35243 TITLE Change Addition ☐ Delete TIT: F DEMARAY, DREW C NAME NAME ONE HEALTHSOUTH PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP \_ **BIRMINGHAM AL 35243** CHY-ST-ZIP X Delete TITLE VP ☐ Change Addition TITLE BOTTS, RICHARD E NAME NAME BRIAN M MENKE ONE HEALTHSOUTH PARKWAY STREET ADDRESS STREET ADDRESS ONE HEALTHSOUTH PARKWAY BIRMINGHAM AL CITY-ST-ZIP CITY-ST-78P BIRMINGHAM, AL 35243 TITLE Delete TITLE VTD HORTON, WILLIAM W NAME NAME GUY SANSONE ≈ ONE HEALTHSOUTH PARKWAY STREET ADDRESS STREET ADDRESS ONE HEALTHSOUTH PARKWAY CITY-ST-ZIP BIRMINGHAM AL 35243 12. 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if **BIRMINGHAM AL 35243** CITY-ST-ZIP

BRIAN M MENKE

205/967-7116

Daytime Phone #

**FILED** 

Machinent

14021867 #F95000001299

HSC of Ft. Pierce, Inc

## Officers & Directors

Joel C. Gordon Chairman of the Board and Director

Robert P. May President and Director

Gregory L. Doody Secretary

Guy Sansone Vice President Treasurer and Director

Larry D. Taylor Vice President

Patrick A. Foster Vice President

Karen Davis Vice President

C. Drew Demaray Vice President and Assistant Secretary

Beall D. Gary, Jr. Vice President and Assistant Secretary

Brian M. Menke Vice President

Lisa M. Byrd Vice President

C/O

Healthsouth Corporation One Healthsouth Parkway Birmingham, AL 35243