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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000003705 (9)

HEARTLAND REHABILITATION SERVICES, INC.

ONE SEAGATE ATTN: TAX 21 TOLEDO OH 43604-2616 US		ONE SEAGATE ATTN: TAX 21 TOLEDO OH 43804-1558 US			Date incorporated or Qualified 07/31/1995	J	ate of Last 24/1996	Report	
2. Principal Pla	ace of Business	28. Mailing Address				4. FEI Number	- <u>h</u>		Applied For
21]		26				34-1280619			Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State	2	City & State				6. Election Campaign Financing		\$5.0	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	├ ~~	untry		8. This corporation has liability for i			s. 199.032,
24	[25]	29	30				Yes [
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Re	JIETOLGO .	Agent	
C T CORPORATION SYSTEM					Tarrio				
1200 SOUTH PINE ISLAND ROAD				62	Street A	ddress (P.O. Box Number is Not Acceptab	le)		
PLAN	ITATION FL 33324			83					
				المال					
				84	City		FI	85 Zip	Code
44 6)	dan aha						No analysis
office or re	o the provisions of Sections 607,0502 og-stered agent, or both, in the State (of Florida. Such change was	authoriz	ed by	e-named c the corpo	corporation submits this statement for the poration's board of directors. I hereby acception	urpose o	ı changing ointment a	its registered is registered
agent Lar	n familiar with, and accopt the obliga	tions of, Section 607.0505, F	lorida St	atutes	3.		• •		_
SIGNATURE.							5.175		
12.	Signature, typicd or printed name of registored ager OFFICERS AND		13		anutangia tre	ADDITIONS/CHANGES TO DESIGN SEE ATTACHE	DATE CRS AND	DIRECTO	PS IN 12
TOLE	CCEO	DELETE		TITLE	Т	OFF ATTACK	3070	Change	Addition
NAME	ORMOND, PAUL A	ED pricie		NAME		SEE ALINONE.		LL Orlange	C) Addition
STREET ADDRESS	ONE SEAGATE				ADDRESS				
	TOLEDO OH 43604-2616								
CHY-ST 70P TITLE	VC00	DELETE		CITY-S TITLE	11-ZIP			Change	Addition
NAME	WEIKEL, M. KEITH		- 1	NAME	ł			U. C. Harry	LJ Hadilon
	ONE SEAGATE				I DDDCCC				
STREET ADORESS	TOLEDO OH 43604-2616				ADDRESS				
CITY: ST: 20°	VCF0	DELETE		CITY-S	51 - 2112			Change	Addition
NAME	MEYERS, GEOFFREY G	Land Pricere		NAME	ļ			C. C. Kingo	
4	ONE SEAGATE				ADDRESS	•			
STREET ADDRESS	TOLEDO OH 43804-2616								
CITY-S1-ZIP THUE	AS	DELETE		CITY-S	SI-ZIP	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME	MEYERS, GEOFFREY G	_ state		NAME	ł			Ondrige	L.J AUGIGIOT
STREET ADDRESS	ONE SEAGATE				ADDRESS				
1	TOLEDO OH 43604-2616		1		- 1				
CITY-ST-ZIP TITLE	V	DELETE		CITY-S TITLE	II-ZIP			Change	Addition
NAME	TUTTLE, RICHARD C	9-4		NAME				— alicida	- Andriver
STREET ADDRESS	ONE SEAGATE				ADDRESS				
City-SI-7iF	TOLEDO OH 43604-2616		1		1				
11/1	P	DELETE		CITY - S TITLE	13-217			Change	Addition
NAME	WHEELER, RICHARD C	F-1		NAME	1			and annually	Print 1 (Marin II)
STREET ADDRESS	ONE SEAGATE		•		ADDRESS				
Crity St ZIP	TOLEDO OH 43604-2616			CITY-S	1				
		i with this filing does not our				ated in Section 119.07(3)(i), Florida Statute	s. I furthe	r certify the	at the
information Lam an of	n indicated on this annual report or st	upplemental annual report is the receiver or trustee empo	true and wered to	exec exec	urate and oute this re	that my signature shall have the same lega aport as required by Chapter 607, Florida S	l effect a: tatutes; s	s if made u	inder oath; that
SIGNAT	URE: A SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICE	C. C. P. B. R.	CTOR	dvid	Lourich APR 93 1997	(4	19)35.	5764

HEARTLAND REHABILITATION SERVICES, INC.

OFFICERS

Paul A. Ormond M. Keith Weikel

Geoffrey G. Meyers

Richard C. Wheeler Michael E. Peters Michael D. Witmer R. Jeffrey Bixler William H. Kinschner

Barry A. Lazarus Spencer C. Moler

Wade O'Brian

John K. Graham

Jack W. Ficks

John I. Remenar

David L. Gehrich Douglas G. Haag

Chairman & Chief Executive Officer Senior Executive Vice President & Chief Operating Officer

Executive Vice President, Chief Financial Officer & Assistant Secretary

President

Vice President

Vice President

Vice President, General Counsel & Secretary Vice President, Director of Management

Support Services

Vice President, Director of Reimbursement

Vice President, Controller, Treasurer

& Assistant Secretary

Vice President, Director of Human Resources and Labor Relations & Assistant Secretary

Assistant Vice President, General Manager

of Vision Management Services and

Ancillary Businesses

Assistant Vice President, Manager of

Therapy Operations Assistant Vice President, Director of

Financial Services & Assistant Treasurer Assistant Secretary & Assistant Treasurer

Assistant Treasurer

DIRECTORS

Paul A. Ormond M. Keith Weikel Geoffrey G. Meyers Richard C. Tuttle

ADDRESS FOR ALL IS:

One SeaGate

Toledo, Ohio 43604-2616

Phone: (419) 252-5600