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FILED
May 13 1997 8:00am
Secretary of State

PROPRIETARY
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000000055 (1)

1. Corporation Name

EAGLE REHAB CORPORATION

Principal Place of Business

6001 INDIAN SCHOOL ROAD, N.E.
ALBUQUERQUE NM 87110

Mailing Address

6001 INDIAN SCHOOL ROAD, N.E.
ALBUQUERQUE NM 87110-4139



3. Date Incorporated or Qualified

01/03/1996

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

85-0436768

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
CEOD	GONZALES, CHARLES H	1419 CAMINO AMPARO	ALBUQUERQUE NM	<input type="checkbox"/>
CD	ELLIOTT, NEAL M	5091 LOS POBLANOS, N.W.	ALBUQUERQUE NM	<input type="checkbox"/>
P	ZIMMERMAN, PAUL	6001 INDIAN SCHOOL RD., N.W.	ALBUQUERQUE NM	<input type="checkbox"/>
VD	BELT JR, KLEMETT L	9406 SEABROOK NE	ALBUQUERQUE NM	<input checked="" type="checkbox"/>
V	NAME, DAVID V	6001 INDIAN SCHOOL ROAD, N.E.	ALBUQUERQUE NM	<input type="checkbox"/>
V	SCHOFIELD, ERNEST A	6121 CAROUSAL NW	ALBUQUERQUE NM	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
1.1	1.2	1.3	1.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1	2.2	2.3	2.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.1	3.2	3.3	3.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.1	4.2	4.3	4.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.1	5.2	5.3	5.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.1	6.2	6.3	6.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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.

SIGNATURE:

SIGNATURE REQUIRED

4/24/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)

**Eagle Rehab Corporation (DE Corp.)
List of Officers and Directors**

<u>Name</u>	<u>Title</u>	<u>Street Address</u>
Paul Zimmerman	President	3850 North Wilke Road Suite 200 Arlington Heights, IL 60004
Neal M. Elliott	Director	6001 Indian School Rd NE Albuquerque, NM 87110
David Van Name	Sr. Vice-President	3850 North Wilke Road Suite 200 Arlington Heights, IL 60004
Charles H. Gonzales	CEO, Director	6001 Indian School Rd NE Albuquerque, NM 87110
Ernest A. Schofield	Sr. Vice-President Director	6001 Indian School Rd NE Albuquerque, NM 87110
James P. Covert	Sr. Vice-President	3850 North Wilke Road Suite 200 Arlington Heights, IL 60004
Scot Sauder	Vice-President, Secretary	6001 Indian School Rd NE Albuquerque, NM 87110
Jacqueline Gordon	Asst. Secretary	6001 Indian School Rd NE Albuquerque, NM 87110

The above Officers and Directors terms expire September 30, 1997