


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90448 026 ***150.00

DOCUMENT # F98000004011	
1. Entity Name KINDRED HEALTHCARE OPERATING, INC.	

Principal Place of Business 680 SOUTH FOURTH ST ATTN: TAX DEPARTMENT LOUISVILLE, KY 40202-2412	Mailing Address 680 SOUTH FOURTH ST ATTN: TAX DEPARTMENT LOUISVILLE, KY 40202-2412
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	
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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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>	

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIEDMON, M. SUZANNE 680 S. FOURTH ST. LOUISVILLE, KY 40222412 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Riedman, Suzanne M.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WINDHORST, DAVID R 680 S. FOURTH ST. LOUISVILLE, KY 40202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIAZ, PAUL J 680 S. FOURTH ST. LOUISVILLE, KY 40202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PRESIDENT FRANK J. BATTAFARANO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT ROBINSON, HANK 680 S. FOURTH ST. LOUISVILLE, KY 40202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LECHLEITER, RICHARD A 680 S. FOURTH ST. LOUISVILLE, KY 40202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LANDENWICH, JOSEPH L 680 S. FOURTH ST. LOUISVILLE, KY 40202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <u>Hank Robinson</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	4/17/06 502-596-7300 Date Daytime Phone #

ATTACHMENT

Directors / Officers Report

As of 3/24/2006

Kindred Healthcare Operating, Inc.

50012051
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Directors

Richard E. Chapman

Director

Primary Address: 680 South Fourth Street
Louisville, Kentucky 40202

Richard A. Lechleiter

Director

Primary Address: 680 South Fourth Street
Louisville, Kentucky 40202

M. Suzanne Riedman

Director

Primary Address: 680 South Fourth Street
Louisville, Kentucky 40202

Officers

Janet M. Allen

Vice President, Clinical Services, Pharmacy Division

Primary Address: 680 South Fourth Street
Louisville, Kentucky 40202

William M. Altman

Senior Vice President, Compliance and Government Programs

Primary Address: 680 South Fourth Street
Louisville, Kentucky 40202

Pamela J. Athanas

Vice President, Clinical Operations, Northeast Region, Health Services Division

Primary Address: 680 South Fourth Street
Louisville, Kentucky 40202

Frank J. Battafarano

Executive Vice President and President, Hospital Division

Primary Address: 680 South Fourth Street
Louisville, Kentucky 40202

Barbara L. Baylis

Senior Vice President, Clinical and Residential Services, Health Services Division

Primary Address: 680 South Fourth Street
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Kimberly A. Beach

Vice President, Operational Systems, Health Services Division

Primary Address: 680 South Fourth Street
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Directors / Officers Report

As of 3/24/2006

Kindred Healthcare Operating, Inc.

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Senior Vice President, Northeast Region, Health Services Division

Primary Address: 200 Brickstone Plaza
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Michael J. Bean

Vice President, Tax

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Gaylia B. Bond

Senior Vice President, Human Resources, Hospital Division

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Lane M. Bowen

Executive Vice President and President, Health Services Division

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Benjamin A. Breier

President, Peoplefirst Rehabilitation Services

Primary Address: 680 South Fourth Street
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Scott A. Burns

Vice President, Sales and Marketing, Pharmacy Division

Primary Address: 680 South Fourth Street
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John P. Caron

Vice President, Finance, South Region, Hospital Division

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Richard E. Chapman

Executive Vice President and Chief Administrative and Information Officer

Primary Address: 680 South Fourth Street
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Michael J. Comer

Vice President, Finance, West Region, Hospital Division

Primary Address: 680 South Fourth Street
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Peter D. Corless

Senior Vice President, Human Resources and Administration, Health Services Division

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Directors / Officers Report

As of 3/24/2006

Kindred Healthcare Operating, Inc.

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Division

Primary Address: 680 South Fourth Street
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Vice President, Operations, East Region, Hospital
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Primary Address: 1313 St. Anthony Place
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Douglas L. Curnutte

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Judith A. Curtiss

Vice President, Operations, South Region, Hospital
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Primary Address: 8751 W. Broward Blvd.
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Vice President and Controller, Hospital Division

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Senior Vice President, Central Region, Health
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President and Chief Executive Officer

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Anthony Disser

Senior Vice President, Clinical Operations, Hospital
Division

Primary Address: 680 South Fourth Street
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Stephen M. Dobler

Vice President, Information Systems and
Administration

Primary Address: 680 South Fourth Street
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Directors / Officers Report

As of 3/24/2006

Kindred Healthcare Operating, Inc.

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Vice President, Business Development, Hospital Division

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Vice President, Finance, East Region, Hospital Division

Primary Address: 680 South Fourth Street
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Directors / Officers Report

As of 3/24/2006

Kindred Healthcare Operating, Inc.

Donna G. Kelsey

Senior Vice President, Pacific Region, Health Services Division

Primary Address: 680 South Fourth Street
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Hans E. Koehler

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Chief Medical Officer and Senior Vice President, Health Services Division

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Katheryn J. Markham

Vice President, Information Systems and Administration

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Directors / Officers Report

As of 3/24/2006

Kindred Healthcare Operating, Inc.

Primary Address: 680 South Fourth Street
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Primary Address: 680 South Fourth Street
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Directors / Officers Report

As of 3/24/2006

Kindred Healthcare Operating, Inc.

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ATTACHMENT

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As of 3/24/2006

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Vice President, Information Systems Operations and Telecommunications

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Directors / Officers Report

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Kindred Healthcare Operating, Inc.

Primary Address: 680 South Fourth Street
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