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Apr 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L23773 (9)

1. Corporation Name
SCA-ST. PETERSBURG, INC.



Principal Place of Business ONE HEALTHSOUTH PKWY. BIRMINGHAM AL 35243 US	Mailing Address ONE HEALTHSOUTH PKWY. BIRMINGHAM AL 35243 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/17/1989

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

4. FEI Number 58-1863462	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> 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. City
84. City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCRUSHY, RICHARD M	1.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	1.4 CITY-ST-ZIP	
TITLE	P <input checked="" type="checkbox"/> DELETE	2.1 TITLE	PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BENNETT, JAMES P.	2.2 NAME	PATRICK A. FOSTER
STREET ADDRESS	ONE HEALTHSOUTH PKWY.	2.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	BIRMINGHAM AL	2.4 CITY-ST-ZIP	BIRMINGHAM, AL 35243
TITLE	VPTD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	VICE PRESIDENT & TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BEAM, AARON JR.	3.2 NAME	MICHAEL D. MARTIN
STREET ADDRESS	ONE HEALTHSOUTH PKWY.	3.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	BIRMINGHAM AL	3.4 CITY-ST-ZIP	BIRMINGHAM, AL 35243
TITLE	VPSD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TANNER, ANTHONY J.	4.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PKWY	4.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	4.4 CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	5.1 TITLE	VICE PRESIDENT & ASST. SEC. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARTIN, MICHAEL D.	5.2 NAME	WILLIAM W. HORTON
STREET ADDRESS	ONE HEALTHSOUTH PKWY	5.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	BIRMINGHAM AL	5.4 CITY-ST-ZIP	BIRMINGHAM, AL 35243
TITLE	VP <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OWENS, WILLIAM T.	6.2 NAME	
STREET ADDRESS	ONE HEALTHSOUTH PKWY.	6.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	6.4 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. **SEE ATTACHMENT**

SIGNATURE: *Richard E. Botts* RICHARD E. BOTTS, VICE PRESIDENT 3/23/98 (205) 967-7116

CR2E034 (10/97)

**HEALTHSOUTH SURGERY CENTERS
OFFICERS AND DIRECTORS**

1. **Richard M. Scrushy, Chairman of the Board/Director**
One HealthSouth Parkway
Birmingham, Alabama 35243
2. **Patrick A. Foster, President**
One HealthSouth Parkway
Birmingham, Alabama 35243
3. **Michael D. Martin, Vice President and Treasurer**
One HealthSouth Parkway
Birmingham, Alabama 35243
4. **Anthony J. Tanner, Vice President and Secretary/Director**
One HealthSouth Parkway
Birmingham, Alabama 35243
5. **William T. Owens, Vice President**
One HealthSouth Parkway
Birmingham, Alabama 35243
6. **William W. Horton, Vice President and Assistant Secretary**
One HealthSouth Parkway
Birmingham, Alabama 35243
7. **C. Drew Demaray, Vice President and Assistant Secretary**
One HealthSouth Parkway
Birmingham, Alabama 35243
8. **Richard E. Botts, Vice President**
One HealthSouth Parkway
Birmingham, Alabama 35243
9. **Beall D. Gary, Jr., Vice President and Assistant Secretary**
One HealthSouth Parkway
Birmingham, Alabama 35243
10. **Stacy H. Pulliam, Assistant Treasurer and Assistant Secretary**
One HealthSouth Parkway
Birmingham, Alabama 35243