

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003741

FILED
Mar 14, 2012
Secretary of State

Entity Name: HEALTHSOUTH REHABILITATION HOSPITAL OF MARION COUNTY, LLC

Current Principal Place of Business:

3660 GRANDVIEW PARKWAY
SUITE 200
BIRMINGHAM, AL 35243

New Principal Place of Business:

Current Mailing Address:

3660 GRANDVIEW PARKWAY
SUITE 200
BIRMINGHAM, AL 35243

New Mailing Address:

FEI Number: 27-3308405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: WHITTINGTON, JOHN P
Address: 3660 GRANDVIEW PARKWAY, SUITE 200
City-St-Zip: BIRMINGHAM, AL 35243

Title: MGR
Name: TARR, MARK J
Address: 3660 GRANDVIEW PARKWAY, SUITE 200
City-St-Zip: BIRMINGHAM, AL 35243

Title: MGR
Name: COLTHARP, DOUGLAS E
Address: 3660 GRANDVIEW PARKWAY, SUITE 200
City-St-Zip: BIRMINGHAM, AL 35243

Title: VP
Name: LANGLEY, THOMAS E
Address: 3660 GRANDVIEW PARKWAY, SUITE 200
City-St-Zip: BIRMINGHAM, AL 35243

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS E. LANGLEY

VP

03/14/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date