

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90174 015 ***150.00

DOCUMENT # M20113

1. Entity Name
DOCTORS' HEALTH SERVICE CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
ONE HEALTHSOUTH PARKWAY
Suite, Apt. #, etc.

3. Mailing Address
P.O. BOX 380546
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
BIRMINGHAM, AL

City & State
BIRMINGHAM, AL

4. FEI Number
59-2583182

Applied For
Not Applicable

Zip
35243

Country
US

Zip
35243

Country
US

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
CT CORPORATION

Street Address (P.O. Box Number is Not Acceptable)
1200 S. PINE ISLAND ROAD

City
PLANTATION

FL Zip Code
33324

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 _____ DATE _____

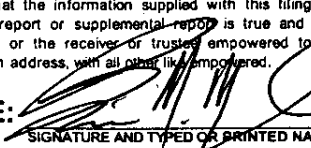
Signature, typed or printed of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		
TITLE CD NAME GORDON, JOEL C STREET ADDRESS ONE HEALTHSOUTH PARKWAY CITY - ST - ZIP BIRMINGHAM, AL 35243	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE VP NAME SANSONE, GUY STREET ADDRESS ONE HEALTHSOUTH PARKWAY CITY - ST - ZIP BIRMINGHAM, AL 35243	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE PD NAME MAY, ROBERT P STREET ADDRESS ONE HEALTHSOUTH PARKWAY CITY - ST - ZIP BIRMINGHAM, AL 35243	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE S NAME DOODY, GREG L STREET ADDRESS ONE HEALTHSOUTH PARKWAY CITY - ST - ZIP BIRMINGHAM, AL 35243	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE V NAME BRIAN M. MENKE STREET ADDRESS ONE HEALTHSOUTH PARKWAY CITY - ST - ZIP BIRMINGHAM, AL 35243	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE V NAME TAYLOR, LARRY D STREET ADDRESS ONE HEALTHSOUTH PARKWAY CITY - ST - ZIP BIRMINGHAM, AL 35243	TITLE NAME STREET ADDRESS CITY - ST - ZIP	

12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **BRIAN M. MENKE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4/22/04** Daytime Phone # **205-967-7116**

ATTACHMENT 14020636
M20113

ANNUAL LIST OF OFFICERS

Patrick A. Foster	Vice President
Karen G. Davis	Vice President
C. Drew Demaray	Vice President and Assistant Secretary
Beall D. Gary, Jr.	Vice President and Assistant Secretary

All Addresses c/o
HEALTHSOUTH Corporation
One Healthsouth Parkway
Birmingham, AL 35243
Phone (205) 967-7116