# FILE NOW: FILING FEE AFTER MAY:1ST IS \$550.00

**PROFIT** TOORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

#### DOCUMENT # M48794

1. Corporation Name

CONTINENTAL MEDICAL SYSTEMS OF FLORIDA, INC.

Principal Place	e of Business	Mailing Address	Mailing Address						
ONE HEALTHSOUTH PKWY BIRMINGHAM AL 35243 US		P O BOX 380546 Birmingham AL 35238 US	BIRMINGHAM AL 35238		DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed				
}	·					03/20/1987			
2. Principal P	Place of Business	2a, Mailing Address				4. FEI Number	$\overline{}$	Applied For	
21		26	26			58-1764895	t	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<del></del>				\$8	.75 Additional	
22	•	27				5. Certificate of Status Desired		ee Required	
City & State City & State			te			6. Election Campaign Financing	\$!	5.00 May Be	
23 28						Trust Fund Contribution		dded to Fees	
Zip	Country 25	Zíp	Zip Country			This corporation owes the current year Int Personal Property Tax.	angible ⊟ Ye		
24 25 29 30  9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
<del></del>	3. Name and Address of Con-	on nogistered Agent		81	Name	io, manio dina managara da man	-6	<del></del>	
CT CORPORATION SYSTEM									
1200 S. PINE ISLAND ROAD				82	Street Add	eet Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324				83					
,				"					
3				84	City	. FL	85	Zip Code	
l office or r	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obliging the control of the contr	e of Florida. Such change was a	uthorized	iby 1	the corporat	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoi	chang	ing its registered t as registered	
SIGNATURE						ad when reinstation) DATE			
Signature, typed or printed name of registered agent and title if applicable. (NOTÉ: Register  12. OFFICERS AND DIRECTORS  13				Agent	signature requir	required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE				TLE		Change Addition			
SEE ATTACHED LIST				12 MANE			_	<b>—</b> —	

ORS IN 12 Addition SCHUSMY, HICHARD M ONE HEALTHSOUTH PKWY 1.3 STREET ADDRESS STREET ADDRESS **BIRMINGHAM AL 35243** 1.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change ☐ Addition TITLE PD 2.1 T∏L€ BENNETT, JAMES P 2,2 NAME NAME ONE HEALTHSOUTH PKWY 2.3 STREET ADORESS STREET ADDRESS BIRMINGHAM AL 35243 2. 4 CITY- ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 3.1 TITLE TITLE DVS TANNER, ANTHONY J 3.2 NAME ONE HEALTHSOUTH PKWY 3.3 STREET ADDRESS STREET ADDRESS **BIRMINGHAM AL 35243** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 4.1 TITLE TITLE MARTIN, MICHAEL D 4, 2 NAME NAME ONE HEALTHSOUTH PKWY 4.3 STREET ADDRESS STREET ADDRESS BIRMINGHAM AL 35243 4.4 CITY-ST-ZIP CTTY-ST-ZIP ☐ DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME **BOTTS, RICHARD E** ONE HEALTHSOUTH PARKWAY 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIF BIRMINGHAM AL 35243 CITY-ST-ZIP \_\_ DELETE 6.1 TITLE ☐ Change [ ] Addition TITLE 6.2 NAME NAME BROWN, P D 6.3 STREET ADDRESS ONE HEALTHSOUTH PKWY STREET ADDRESS

**BIRMINGHAM AL 35243** 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 suppliemental 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 employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if ch with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE** 

RICHARD E. BOTTS

(205) 967-7116

8/29

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**FILED** 

**Secretary of State** 

03-29-1999 90095 020 \*\*\*150.00

Mar 29, 1999 8:00 am

## CONTINENTAL MEDICAL SYSTEMS OF FLORIDA, INC.

DOCUMENT: M48794 List of Officers and Directors 271587-91095-20 M48794

### Officers:

Richard M. Scrushy - Chairman of the Board

James P. Bennett - President

Michael D. Martin - Vice President and Treasurer

Anthony J. Tanner - Vice President and Secretary

P. Daryl Brown - Vice President

Robert E. Thomson – Vice President

William T. Owens - Vice President

William W. Horton - Vice President and Assistant Secretary

Beall D. Gary, Jr. - Vice President and Assistant Secretary

C. Drew Demaray - Vice President and Assistant Secretary

Richard E. Botts - Sr. Vice President

Stacy H. Pulliam - Vice President, Assistant Treasurer and Assistant Secretary

### Directors:

Richard M. Scrushy

James P. Bennett

Anthony J. Tanner

Michael D. Martin

All addresses c/o HEALTHSOUTH Corporation One HEALTHSOUTH Parkway Birmingham, Alabama 35243