

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000014059**

1. Entity Name

HEALOTHSOUTH OF NAPLES, INC.**FILED**
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90070 021 ***150.00

0665297

Principal Place of Business

Mailing Address

**ONE HEALTHSOUTH PKWY.
BIRMINGHAM AL 35243****ONE HEALTHSOUTH PKWY.
BIRMINGHAM AL 35243****00042473**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

63-1244180

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	SCRUSHY, RICHARD M	
STREET ADDRESS	ONE HEALTHSOUTH PKWY.	
CITY-ST-ZIP	BIRMINGHAM AL 35243	

TITLE	D.P.C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Richard M. Scrushy	
STREET ADDRESS	One HealthSouth Pkwy.	
CITY-ST-ZIP	Birmingham, AL 35243	

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BENNETT, JAMES P	
STREET ADDRESS	ONE HEALTHSOUTH PKWY.	
CITY-ST-ZIP	BIRMINGHAM AL 35243	

TITLE	V.T.D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	William T. Owens	
STREET ADDRESS	One HEalthSouth Pkwy.	
CITY-ST-ZIP	Birmingham, AL 35243	

TITLE	D	<input type="checkbox"/> Delete
NAME	HALE, BRANDON O	
STREET ADDRESS	ONE HEALTHSOUTH PKWY.	
CITY-ST-ZIP	BIRMINGHAM AL 35243	

TITLE	D.V.S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brandon O. Hale	
STREET ADDRESS	One HEalthSouth Pkwy.	
CITY-ST-ZIP	Birmingham, AL 35243	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Richard E. Botts	
STREET ADDRESS	One HealthSouth Pkwy.	
CITY-ST-ZIP	Birmingham, AL 35243	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Larry Taylor	
STREET ADDRESS	One hEalthSouth Pkwy.	
CITY-ST-ZIP	Birmingham, AL 35243	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	*SEE ATTACHED LIST*	
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment to an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard E. Botts

Date

4/16/01

Daytime Phone #

(205) 967-7116

CR2E034 (10/00)

Attachment

HealthSouth of Naples, Inc.

Document #: P00000014059

List of Officers and Directors

P00000014059
D0042473.

Richard M. Scrushy, Chairman of the Board, President and Director

Brandon O. Hale, Vice President, Secretary and Director

William T. Owens, Vice President, Treasurer and Director

Robert E. Thomson, Vice President-Inpatient

Larry D. Taylor, Vice President-O.P. East

Patrick A. Foster, Vice President-O.P. West

William W. Horton, Vice President and Assistant Secretary

C. Drew Demaray, Vice President and Assistant Secretary

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

Richard E. Botts, Vice President

Malcolm E. McVay, Vice President and Assistant Treasurer

Catherine N. Fowler, Vice President, Assistant Treasurer and Assistant Secretary

All addresses c/o

HEALTHSOUTH Corporation

One Healthsouth Parkway

Birmingham, Alabama 35243

Telephone (205) 967-7116