

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02374

1. Entity Name

HEALTHSOUTH REHABILITATION CORPORATION

Principal Place of Business

Mailing Address

ONE HEALTHSOUTH PKWY
BIRMINGHAM AL 35243
US

P.O. BOX 380546
BIRMINGHAM AL 32538
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 63-0860407

Applied For

Not Applicable

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 ROAD
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
NAME
STREET ADDRESS
CITY-ST-ZIP
CBD
SCRUSHY, RICHARD M
ONE HEALTHSOUTH PKWY
BRIMINGHAM AL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BOTTS, RICHARD E.
ONE HEALTHSOUTH PKWY
BIRMINGHAM AL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPSD
TANNER, ANTHONY
ONE HEALTHSOUTH PKWY
BRIMINGHAM AL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V,D,S
Brandon O. Hale
One Healthsouth Pkwy.
Birmingham, AL 35243 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
MARTIN, MICHAEL D
ONE HEALTHSOUTH PKWY
BRIMINGHAM AL 35243 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
Robert E. Thomson
One Healthsouth Pkwy.
Birmingham, AL 35243 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BENNETT, JAMES P
ONE HEALTHSOUTH PKWY
BRIMINGHAM AL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
OWENS, WILLIAM T
ONE HEALTHSOUTH PKWY
BRIMINGHAM AL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V,T ☒ Change ☐ Addition

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 with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard E. Botts

Date

Daytime Phone #

4/25/01 (205) 967-7116

CR2E034 (10/00)

0565148

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90059 035 ***150.00



DO NOT WRITE IN THIS SPACE