2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P02374 DOCUMENT

1. Entity Name



FILED May 05, 2003 8:00 am Secretary of State

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HEALTHSOUTH CORPORATION Principal Place of Business Mailing Address ONE HEALTHSOUTH PKWY P.O. BOX 380546 BIRMANGHAM AL 35243 BIRMINGHAM AL 32538 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 63-0860407 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zio 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CD ☐ Addition TITLE Channe Delete TITLE SCRUSHY, RICHARD M Joel C. Gordon NAME NAME STREET ADDRESS ONE HEALTHSOUTH PKWY One HealthSouth Parkway STREET ADDRESS **BRIMINGHAM AL** Birmingham, AL CÎTY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete Change TITLE TITLE BOTTS, RICHARD E. NAME NAME ONE HEALTHSOUTH PKWY STREET ADDRESS STREET ADDRESS **BIRMINGHAM AL** CITY-ST-ZIP CITY-ST-7IP Delete VTD Addition TITLE TITLE X Change Robert P. May MARTIN, MICHAEL D NAME NAME STREET ADDRESS One HealthSouth Parkway STREET ADDRESS ONE HEALTHSOUTH PKWY Birmingham, AL CITY-ST-ZIP **BRIMINGHAM AL 35243** CITY-ST-ZIP VAS ☐ Delete TITLE Change Addition TITLE C. Drew Demaray OWENS, WILLIAM T NAME NAME ONE HEALTHSOUTH PKWY STREET ADDRESS One HealthSouth Parkway STREET ADDRESS Birmingham, AL CITY-ST-ZIP **BRIMINGHAM AL** CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE Larry D. Taylor NAME NAME STREET ADDRESS STREET ADDRESS One HealthSouth Parkway CITY-ST-ZIP CITY-ST-ZIP Birmingham, AL 35243 VAS ☐ Change TITLE TITLE Addition Delete William W. Horton NAME NAME STREET ADDRESS STREET ADDRESS One HealthSouth Parkway Birmingham, AL CITY-ST-ZIP 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 for truespee empowered to steep eights report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chaptered or on attachment with a supplement with a fundamental property of the statutes. changed, or on an attachment

SIGNATURE:

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

UIRED Richard E. Botts, VP 4/30/03