

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P10581**

1. Entity Name

HEALTHSOUTH MEDICAL CENTER, INC.**FILED**
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90070 018 ***150.00

Principal Place of Business

**1 HEALTHSOUTH PARKWAY
BIRMINGHAM AL 35243
US**

Mailing Address

**P O BOX 380546
BIRMINGHAM AL 35238
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

63-0872396

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8:75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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

TITLE **CD** ☐ Delete
NAME **SCRUSHY, RICHARD M**
STREET ADDRESS **ONE HEALTHSOUTH PARKWAY**
CITY-ST-ZIP **BIRMINGHAM AL**TITLE **VPSD** ☐ Delete
NAME **HALE, BRANDON O**
STREET ADDRESS **ONE HEALTHSOUTH PARKWAY**
CITY-ST-ZIP **BIRMINGHAM AL 35243**TITLE **VP** ☐ Delete
NAME **BENNETT, JAMES P**
STREET ADDRESS **ONE HEALTHSOUTH PARKWAY**
CITY-ST-ZIP **BIRMINGHAM AL 35243**TITLE **P** ☐ Delete
NAME **THOMSON, ROBERT E**
STREET ADDRESS **ONE HEALTHSOUTH PARKWAY**
CITY-ST-ZIP **BIRMINGHAM AL 35243**TITLE **T** ☐ Delete
NAME **MCVAY, MALCOLM E**
STREET ADDRESS **ONE HEALTHSOUTH PARKWAY**
CITY-ST-ZIP **BIRMINGHAM AL 35243**TITLE **V** ☐ Delete
NAME **BOTTS, RICHARD E**
STREET ADDRESS **ONE HEALTHSOUTH PARKWAY**
CITY-ST-ZIP **BIRMINGHAM AL 35243**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P.C.D** ☐ Change ☒ Addition
NAME **Richard M. Scrushy**
STREET ADDRESS **One HealthSouth Pkwy.**
CITY-ST-ZIP **Birmingham, AL 35243**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **V.T.D** ☐ Change ☒ Addition
NAME **William T. Owens**
STREET ADDRESS **One HealthSouth Pkwy.**
CITY-ST-ZIP **Birmingham, AL 35243**TITLE **VP** ☒ Change ☐ Addition
NAME **Robert E. Thomson**
STREET ADDRESS **One HealthSouth Pkwy.**
CITY-ST-ZIP **Birmingham, AL 35243**TITLE **V** ☒ Change ☐ Addition
NAME **Malcom E. McVay**
STREET ADDRESS **One HHealthSouth Pkwy.**
CITY-ST-ZIP **Birmingham, AL 35243**TITLE ☐ Change ☐ Addition
NAME
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 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 #

(205) 967-7116

CR2E034 (10/00)

0565166

Attachment

HEALTHSOUTH MEDICAL CENTER, INC.

FID#: 63-0872396

DOCUMENT #: P10581

List of Officers and Directors

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D0042474

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