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Mar 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P15758 (6)
 1. Corporation Name
CONTINENTAL MEDICAL OF PALM BEACH, INC.



Principal Place of Business 600 WILSON LANE P.O. BOX 715 MECHANICSBURG PA 17055 US	Mailing Address 6001 INDIAN SCHOOL RD P.O. BOX 715 ALBUQUERQUE NM 87110 US
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DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified
08/31/1987

2. Principal Place of Business 21 ONE HEALTHSOUTH PARKWAY Suite, Apt. #, etc.	2a. Mailing Address 26 P O BOX 380546 Suite, Apt. #, etc.
22 City & State BIRMINGHAM, AL	27 City & State BIRMINGHAM, AL
23 Zip 35243	24 Country US
25 Zip 35238	26 Country US

4. FEI Number 23-2475467	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	STINSON, EDWARD	
STREET ADDRESS	600 WILSON LANE	
CITY - ST - ZIP	MECHANICSBURG PA	
TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	ELLIOT, NEAL	
STREET ADDRESS	6001 INDIAN SCHOOL DR NE	
CITY - ST - ZIP	ALBUQUERQUE NM	
TITLE	SVP	<input checked="" type="checkbox"/> DELETE
NAME	GONZALES, CHARLES H	
STREET ADDRESS	6001 INDIAN SCHOOL RD NE	
CITY - ST - ZIP	ALBUQUERQUE NM	
TITLE	SVPC	<input checked="" type="checkbox"/> DELETE
NAME	SCHOFIELD, ERNEST A	
STREET ADDRESS	6001 INDIAN SCHOOL DR NE	
CITY - ST - ZIP	ALBUQUERQUE NM	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	MISITANO, ANTHONY F.	
STREET ADDRESS	600 WILSON LANE	
CITY - ST - ZIP	MECHANICSBURG PA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	C/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	SCRUSHY, RICHARD M.	
1.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	
1.4 CITY - ST - ZIP	BIRMINGHAM, AL 35243	
2.1 TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BENNETT, JAMES P.	
2.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	
2.4 CITY - ST - ZIP	BIRMINGHAM, AL 35243	
3.1 TITLE	V/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MARTIN, MICHAEL D.	
3.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	
3.4 CITY - ST - ZIP	BIRMINGHAM, AL 35243	
4.1 TITLE	D/V/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	TANNER, ANTHONY J.	
4.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	
4.4 CITY - ST - ZIP	BIRMINGHAM, AL 35243	
5.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	BOTTS, RICHARD E.	
5.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	
5.4 CITY - ST - ZIP	BIRMINGHAM, AL 35243	
6.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	BROWN, P. DARYL	
6.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY	
6.4 CITY - ST - ZIP	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 supplemental 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, trustee, or assignee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *[Signature]* RICHARD E. BOTTS 2/27/98

CR2E034 (10/97)

Continental Medical of Palm Beach, Inc.
FEI# 23-2475467
1998 Florida Profit Corporation Annual Report
List of Officers and Directors

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

Directors:

Richard M. Scrushy
James P. Bennett
Anthony J. Tanner

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