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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P32928 (4)
1. Corporation Name
CMS REHABILITATION CENTER OF HIALEAH, INC.



Principal Place of Business

Mailing Address

C/O TAX DEPT., P O BOX 715
MECHANICSBURG PA 17055

C/O TAX DEPT., P O BOX 715
MECHANICSBURG PA 17055

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 ONE HEALTHSOUTH PARKWAY		26 P O BOX 380546		02/25/1991	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		25-1650792	
City & State		City & State		Applied For	
23 BIRMINGHAM, AL		28 BIRMINGHAM, AL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 35243		29 35238		30 US	
Country		Country		5. Certificate of Status Desired	
25 US		30 US		30 US	
25 US		30 US		30 US	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	D/C
NAME	ELLIOTT, NEAL M	1.2 NAME	SCRUSHY, RICHARD M.
STREET ADDRESS	0001 INDIAN SCHOOL RD NE	1.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	ALBUQUERQUE NM	1.4 CITY-ST-ZIP	BIRMINGHAM, AL 35243
TITLE	SVP	2.1 TITLE	D/P
NAME	GONZALES, CHARLES H	2.2 NAME	BENNETT, JAMES P.
STREET ADDRESS	0001 INDIAN SCHOOL RD NE	2.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	ALB NM	2.4 CITY-ST-ZIP	BIRMINGHAM, AL 35243
TITLE	V	3.1 TITLE	D/V/S
NAME	MISITANO, ANTHONY	3.2 NAME	TANNER, ANTHONY J.
STREET ADDRESS	000 WILSON LANE, #715	3.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	MECHANICSBURG PA	3.4 CITY-ST-ZIP	BIRMINGHAM, AL 35243
TITLE	SVPC	4.1 TITLE	V/T
NAME	SCHOFIELD, ERNEST A	4.2 NAME	MARTIN, MICHAEL D.
STREET ADDRESS	0001 INDIAN SCHOOL RD NE	4.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	ALB NM	4.4 CITY-ST-ZIP	BIRMINGHAM, AL 35243
TITLE	VPS	5.1 TITLE	V
NAME	SAUDER, SCOT	5.2 NAME	BOTTS, RICHARD E.
STREET ADDRESS	0001 INDIAN SCHOOL RD NE	5.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	ALB NM	5.4 CITY-ST-ZIP	BIRMINGHAM, AL 35243
TITLE	VPT	6.1 TITLE	V
NAME	WARRICK, DOUG	6.2 NAME	BROWN, P. DARYL
STREET ADDRESS	0001 INDIAN SCHOOL RD NE	6.3 STREET ADDRESS	ONE HEALTHSOUTH PARKWAY
CITY-ST-ZIP	ALB NM	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 recorder or trustee 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.

CR2E034 (10/97)

CMS Rehabilitation Center of Hialeah, Inc.

FEI #- 25-1650792

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 addresses c/o

HEALTHSOUTH Corporation

One HEALTHSOUTH Parkway

Birmingham, Alabama 35243