FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
 CORPORATION
 ANNUAL REPORT

1998



FLORI**DA D**EPARTMENT OF STATE

FILED

May 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F

* P95000097824 (3)

MRC REHABILITATION, INC.

Principal Place	e of Business	Mailing Address					19611 1869) (B169)	1011 0101 1041
ATTN: TAX-21 ONE SEAGATE TOLEDO OH 43604		ATTN: TAX-21 ONE SEAGATE TOLEDO OH 49604				DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualified 12/28/1995		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	1	Applied For
21		26				59-3357644	N	ot Applicable
Sulte, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		Additional
22		27				5. Certificate of Clarics Desired	Fee F	Required
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	- Z _i ρ	Country			8. This corporation owes or has paid the		
24	25 29 30 9, Name and Address of Current Registered Agent		30)		Personal Property Tax due June 30.		DANO.
					ame	10. Name and Address of New Registere	a Agent	<u>'</u>
CT CORPORATION SYSTEM				81 1	ante			
1200 SOUTH PINE ISLAND RD.				82 S	Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324				83				
			l					
			Ī	84 C	rty	F	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abover- office or registered agent, or both, in the State of Florida, Such change was authorized by it agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						oration submits this statement for the purpose	of changing	its registered s registered
	m lam iliar with, and accept the obliga-	ions of, Section 607.0505, FI	orida Statu	ites.				-
SIGNATURE	Signature type or or protest have a china public diagram	and the Lauren state (NC)	l Roneland	Anny si		ed when reinstating) DATE		
12.	OFFICERS AND		13.	rigini, or	prostore resident	ADDITIONS/CHANGES TO OFFICERS A		BS IN 12
TITLE	PSTD	DELETE	1.1 1110	ı. LE			☐ Change	
NAME	VICKERMAN, RAYMOND H	/~	1.2 NAI	ME			-	
STREET ADDRESS	3839 COUNTY ROAD 218 EAS	1.3		1.3 STREET ADDRESS				
CITY-ST-ZIP	MIDDLEBERG FL 32068		1.4 CIT	Y-ST-71	,	•		
TITLE	☐ DELETE 21		2 1 1111	LE		0	☐ Change	☐ Addition
NAME	22 h		2.2 NA	ME				
STREET ADORESS			2.3 S1H	REET ADD	RESS	~1.		
CITY-ST-ZIP			2. 4 CIT	Y-ST-Z-	P			
TIFLE	DELETE 3.1		3.1 Т)ТІ	LE		2	Change	☐ Addition
NAME			3.2 NA	ME		SEE STACKED		
STREET ADDRESS			3.3 STR	REET ADO	RESS	7/		
CITY-ST-ZIP				Y-S1-7	P			
TITLE		[] DELETE	4.1 THL	_E	-	· ·	Change	Addition
NAME			4. 2 NA	MÉ				
STREET ADDRESS				EFT ADD				
CITY-ST-ZIP		OF STE		Y - ST - ZII	2		- F1 a.	
TITLE		DELETE	5.1 TITL				∐ Change	☐ Addition
NAME			5.2 NAM					
STREET ADDRESS				EET ADD				}
CITY-ST-ZIP		Delete		Y-ST-ZIF	·			
TITLE		☐ DELETE	6 1 1116				Change	☐ Addition
NAME			6.2 NAN					
STREET ADDRESS			6.3 S1R	EET ADD	RESS			

14. Thereby 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 aroual report or supplicmental 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 of the receiver or trusted 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

David L 645764477 1998

MRC REHABILITATION, INC.

OFFICERS

Paul A. Ormond M. Keith Weikel

Geoffrey G. Meyers

R. Jeffrey Bixler William H. Kinschner

Barry A. Lazarus Spencer C. Moler

Wade O'Brian

John K. Graham

John I. Remenar

David L. Gehrich Douglas G. Haag

Chairman, President & Chief Executive Officer Senior Executive Vice President & Chief Operating Officer

Executive Vice President, Chief Financial Officer & Assistant Secretary

Vice President, General Counsel & Secretary Vice President, Director of Management

Support Services

Vice President, Director of Reimbursement Vice President, Controller, Treasurer & Assistant Secretary

Vice President, Director of Human Resources and Labor Relations & Assistant Secretary

Assistant Vice President, General Manager of Vision Management Services and

Ancillary Businesses Assistant Vice President, Director of Financial Services & Assistant Treasurer Assistant Secretary & Assistant Treasurer

Assistant Treasurer

DIRECTORS

Paul A. Ormond M. Keith Weikel Geoffrey G. Meyers

ADDRESS FOR ALL IS:

One SeaGate Toledo, Ohio 43604-2616 Phone: (419) 252-5600