104349

4. FEI Number Applied For 59-3357644 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324

City

| ₿. | The above named entity | y submits this statemer | it for the purpose of c | nanging its registere | ea office or registerea. | agent, or both, in t | ne State of Florida |
|----|------------------------|-------------------------|-------------------------|-----------------------|--------------------------|----------------------|---------------------|
| | | | | | | | |

333 N. SUMMIT

W: TAX-City & State

9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00

2001 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

TOLEDO OH 43604

ATTN: TAX-21

ONE SEAGATE

DOCUMENT # **P95000097824**

5 James T

Country

USA

6. Name and Address of Current Registered Agent

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

1. Entity Name

ATTN: TAX-21

ONE SEAGATE

TOLEDO OH 43604

Principal Place of Business

2. Principal Place of Business

MRC REHABILITATION, INC.

\$5.00 May Be

Zip Code

10. Election Campaign Financing Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE Change : PLEO ormand, PAUL A. ORMOND, P A NAME NAME STREET ADDRESS STREET ADDRESS ONE SEAGATE CITY-ST-ZIP CITY-ST-7IP TOLEDO O 43604 TOLEdo, DA 43604 VP CDG TITLE Delete TITLE Change ☐ Addition weikel, M. Keitt T St. 333 N. SUMMIT St. WEIKEL, M K NAME NAME STREET ADDRESS STREET ADDRESS ONE SEAGATE CITY-ST-ZIP CITY-ST-ZIP 70CELO, OH 43604 TOLEDO OH 43604 TITLE TITLE ☐ Delete VSD ☐ Addition NAME NAME BIXLER, R J Bixler, R JeFFREY STREET ADDRESS STREET ADDRESS ONE SEAGATE CITY-ST-ZIP CITY-ST-7IP **TOLEDO OH 43604** Addition ☐ Delete TITLE Change KINSCHNER, WILLIAM H. KINSCHNER, W H STREET ADDRESS 37) N. Summid ST. STREET ADDRESS ONE SEAGATE CITY-ST-ZIP CITY-ST-7IP Toldon OH 43604 TOLEDO OH 43604 TITLE ☐ Delete TITLE ☐ Addition LAZARUS BARRY A. 333N. SJAMIT ST. TOLICO OH 43604 NAME LAZARUS, B A NAME STREET ADDRESS STREET ADDRESS ONE SEAGATE CITY-ST-ZIP CITY-ST-ZIP **TOLEDO OH 43604** Change TITLE ☐ Delete TITLE UP CAS ☐ Addition MULER, S C
ONE SEGATE

'-ST-ZIP

TOLEDO OH 43604

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information 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. NAME STREET ADDRESS CITY-ST-7IP

(NOTE: Registered Agent signature required when reinstating)

SIGNATURE:

CR2E034 (10/00)

Attachmen S # P9500091824 764349

MRC REHABILITATION, INC.

OFFICERS

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

R. Jeffrey Bixler Steven M. Cavanaugh

Nancy A. Edwards Larry R. Godla John K. Graham Jeffrey A. Grillo Douglas G. Haag David C. Heberling William H. Kinschner

David B. Lanning Barry A. Lazarus Larry C. Lester Spencer C. Moler O. William Morrison Wade B. O'Brian

James P. Pagoaga Richard W. Parades John I. Remenar

F. Joseph Schmitt Jo Ann Young Martin D. Allen

David L. Gehrich Kenneth Gelfarb Thomas R. Kile David K. Nees

Chairman, President & Chief Executive Officer Sr. Exec. Vice President & Chief Operating Officer Executive Vice President, Chief Financial Officer & Assistant Secretary

Vice President, General Counsel & Secretary Vice President, Director of Corporate Development & Assistant Secretary

Vice President, General Manager, Central Division

Vice President, Development & Construction

Vice President, Director of Rehabilitation Services

Vice President, General Manager, Mid-Atlantic Div. Vice President, Treasurer Vice President, Employee Relations Vice President, Director of Management

Support Services

Vice President, Development Vice President, Director of Reimbursement

Vice President, General Manager, Midwest Division

Vice President, Controller & Assistant Secretary

Vice President, General Manager, Eastern Div.

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

Vice President, Rehabilitation Services

Vice President, General Manager, Mid-States Div.

Vice President, Director of Financial Services & Assistant Treasurer

Vice President, General Manager, Southern Div.

Vice President, General Manager of Assisted Living

Assistant Vice President, Director of

Reimbursement Services

Assistant Secretary & Assistant Treasurer

Assistant Secretary

Assistant Treasurer

Associate General Counsel & Assistant Secretary

DIRECTORS

R. Jeffrey Bixler

ADDRESS FOR ALL ABOVE IS:

333 N. Summit St. Toledo, Ohio 43604 Phone: (419) 252-5500