

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000106787 (9)

1. Corporation Name

SOUTH FLORIDA REHAB HOLDING COMPANY

Principal Place of Business

20295 N.E. 29TH PLACE
SUITE 300
AVENTURA FL 33180

Mailing Address

20295 N.E. 29TH PLACE
SUITE 300
AVENTURA FL 33180

FILED

98 JUN -4 PM 1:57

SHARON J. FLORIDA
TALLAHASSEE, FLORIDA



500002557625-2

-06/12/98--01004--015

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/19/1997

2. Principal Place of Business

21 ONE HEALTHSOUTH PARKWAY

Suite, Apt. #, etc.

22

City & State

23 BIRMINGHAM, AL

Zip

24 35243

Country

25 US

2a. Mailing Address

26 P O BOX 380546

Suite, Apt. #, etc.

27

City & State

28 BIRMINGHAM, AL

Zip

29 35238

Country

30 US

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

CAMPBELL, C P JR.
101 E. KENNEDY BLVD.
SUITE 2800
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

CT CORPORATION SYSTEM

82 Street Address (P.O. Box Number is Not Acceptable)

1200 SOUTH PINE ISLAND ROAD

83

84 City

PLANTATION

FL

85 Zip Code

33324

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

Dale Morris

Signature typed in printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME
D
MODER, KENNETH R
STREET ADDRESS
20295 N.E. 29TH PLACE SUITE 300
CITY-ST-ZIP
AVENTURA FL 33180

TITLE ☒ DELETE

NAME
D
PAULEY, LANNY
STREET ADDRESS
20295 N.E. 29TH PLACE SUITE 300
CITY-ST-ZIP
AVENTURA FL 33180

TITLE ☒ DELETE

NAME
D
STEPHENS, JANET L
STREET ADDRESS
20295 N.E. 29TH PLACE SUITE 300
CITY-ST-ZIP
AVENTURA FL 33180

TITLE ☐ DELETE

NAME
TS
STREET ADDRESS
G/4
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME
C/D
RICHARD M. SCRUSHY
1.3 STREET ADDRESS
ONE HEALTHSOUTH PARKWAY
1.4 CITY-ST-ZIP
BIRMINGHAM, AL 35243

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME
P
P. DARYL BROWN
2.3 STREET ADDRESS
ONE HEALTHSOUTH PARKWAY
2.4 CITY-ST-ZIP
BIRMINGHAM, AL 35243

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME
V/S/D
ANTHONY J. TANNER
3.3 STREET ADDRESS
ONE HEALTHSOUTH PARKWAY
3.4 CITY-ST-ZIP
BIRMINGHAM, AL 35243

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME
V/D
JAMES P. BENNETT
4.3 STREET ADDRESS
ONE HEALTHSOUTH PARKWAY
4.4 CITY-ST-ZIP
BIRMINGHAM, AL 35243

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME
V
RICHARD E. BOTTS
5.3 STREET ADDRESS
ONE HEALTHSOUTH PARKWAY
5.4 CITY-ST-ZIP
BIRMINGHAM, AL 35243

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME
V/T
MICHAEL D. MARTIN
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 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 addendum.

SIGNATURE

Richard E. Botts

RICHARD E. BOTTS

1/19/98

(205) 967-7116

CR2E034 (10/97)