

No. C107749	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX C T CORPORATION SYSTEM 300 NORTH 6TH STREET BOISE ID 83701												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FINAL NOTICE **	1. Mailing Address - Please Correct, If Not Correct HEALTH PROVIDERS, INC. TWO PERIMETER PARK SOUTH XXXXXX COMMERCIAL BLVD XXXX BIRMINGHAM, AL 35243 XXXXXX DUBUQUE XXXX FL XXXX		3. Organized Under the Laws of: FL C107749												
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="1" style="width:100%"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td colspan="6" style="text-align:center">SEE ATTACHED</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	SEE ATTACHED					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
SEE ATTACHED															
5. NATURE OF BUSINESS PROVIDER OF MEDICAL PERSONNEL PROVIDER OF MEDICAL PERSONNEL	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. <div style="display: flex; justify-content: space-between;"> <div> Signature <i>Richard E. Botts</i> Name (Typed or Printed) RICHARD E. BOTTS </div> <div> Date 10-30-96 Title VICE PRESIDENT </div> </div>														

DO NOT TAPE OR STAPLE

HEALTH PROVIDERS, INC. 63-1121884

Officers and Directors:

Richard M. Scrushy

James P. Bennett

Aaron Beam, Jr.

Anthony J. Tanner

Michael D. Martin

William T. Owens

William W. Horton

C. Drew Demaray

Richard E. Botts

Stacey H. Pulliam

Chairman of the Board and Director

President

Senior Vice President, Treasurer, and Director

Senior Vice President, Secretary, and Director

Senior Vice President, Finance

Senior Vice President, Finance and Controller

Vice President and Assistant Secretary

Vice President and Assistant Secretary

Vice President

Assistant Treasurer and Assistant Secretary

All addresses c/o

HEALTHSOUTH Corporation

Two Perimeter Park South Suite 224W

Birmingham, AL 35243

(205) 967-7116