

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000104879

Entity Name: ENCOMPASS HOME HEALTH OF THE SOUTHEAST, LLC

Current Principal Place of Business:

6688 N CENTRAL EXPWY
STE 1300
DALLAS, TX 75206

Current Mailing Address:

6688 N CENTRAL EXPWY
STE 1300
DALLAS, TX 75206 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title VP
Name THOMPSON, G ROBERT
Address 6688 N CENTRAL EXPWY STE 1300
City-State-Zip: DALLAS TX 75206

Title PRESIDENT
Name COLTHARP, DOUGLAS E
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

Title SECRETARY
Name DARBY, J PATRICK
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

Title TREASURER
Name FAY, EDMUND M
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: G ROBERT THOMPSON

VICE PRESIDENT

03/12/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date