## **2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000000727

Entity Name: ENCOMPASS HEALTH REHABILITATION HOSPITAL OF SPRING

HILL, INC.

**FILED** Apr 24, 2019 **Secretary of State** 2038096259CC

#### **Current Principal Place of Business:**

12440 CORTEZ BLVD BROOKSVILLE, FL 34613

## **Current Mailing Address:**

9001 LIBERTY PARKWAY BIRMINGHAM, AL 35242 US

FEI Number: 63-1244181 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

C T 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:

City-State-Zip:

Title

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title DIRECTOR, PRESIDENT Title DIRECTOR, SECRETARY, VP

Name COLTHARP, DOUGLAS E. Name DARBY, PATRICK

Address 9001 LIBERTY PARKWAY Address 9001 LIBERTY PARKWAY City-State-Zip: BIRMINGHAM AL 35242 City-State-Zip: BIRMINGHAM AL 35242

Title Title **TREASURER** 

Name FAY, EDMUND M. Name MCCALLUM, ROBERT W. III Address 9001 LIBERTY PARKWAY Address 9001 LIBERTY PARKWAY City-State-Zip: BIRMINGHAM AL 35242

Name JACOBSMEYER, BARBARA A. Address 9001 LIBERTY PARKWAY City-State-Zip: BIRMINGHAM AL 35242

DIRECTOR

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT W. MCCALLUM, III

VICE PRESIDENT

04/24/2019