

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000870

Entity Name: ENVOLVE PEOPLECARE, INC.**Current Principal Place of Business:**7700 FORSYTH BOULEVARD
ST. LOUIS, MO 63105**Current Mailing Address:**7700 FORSYTH BOULEVARD
ST. LOUIS, MO 63105 US**FEI Number: 06-1476380****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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title VICE PRESIENT, TAX
Name DINKELMAN, TRICIA
Address 7700 FORSYTH BOULEVARD
City-State-Zip: ST. LOUIS MO 63105

Title TREASURER
Name BAIOCCHI, SARAH
Address 7700 FORSYTH BOULEVARD
City-State-Zip: ST. LOUIS MO 63105

Title PLAN CHIEF FINANCIAL OFFICER
Name VERRASTRO, GEORGE
Address 7700 FORSYTH BOULEVARD
City-State-Zip: ST. LOUIS MO 63105

Title PRESIDENT, CEO, DIRECTOR
Name LAVELY, DAVID
Address 1151 FALLS ROAD
City-State-Zip: ROCKY MOUNT NC 27804

Title DIRECTOR
Name ASHER, ANDREW
Address 8735 HENDERSON RD., REN1, 3RD FL
City-State-Zip: TAMPA FL 33634

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: TRICIA DINKELMAN**VICE PRESIDENT, TAX****04/27/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date