

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005616

Entity Name: ENCOMPASS HEALTH REHABILITATION HOSPITAL OF TREASURE COAST, INC.**Current Principal Place of Business:**1600 37TH STREET
VERO BEACH, FL 32960**Current Mailing Address:**9001 LIBERTY PARKWAY
BIRMINGHAM, AL 35242 US**FEI Number: 63-1105921****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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 PRESIDENT
Name COLTHARP, DOUGLAS E.
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

Title SECRETARY, VP, DIRECTOR
Name DARBY, 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

Title VP
Name MCCALLUM, ROBERT W. III
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

Title DIRECTOR, VP
Name JACOBMEYER, BARBARA A.
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

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

Title VP
Name PRICE, ANDREW L.
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

Title VP
Name BOYLE, THOMAS H.
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

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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****04/26/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name WILSON, J. RYAN
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

Title ASST. SECRETARY
Name LEASURE, STEPHEN D.
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

Title VP
Name BALL, EDMUND H.
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242

Title VP
Name BEDARD, LORI
Address 9001 LIBERTY PARKWAY
City-State-Zip: BIRMINGHAM AL 35242