

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G94649

**Entity Name:** WILLOUGH HEALTHCARE, INC.

**Current Principal Place of Business:**

201 N. FRANKLIN STREET  
SUITE 1910  
TAMPA, FL 33602

**Current Mailing Address:**

201 N. FRANKLIN STREET  
SUITE 1910  
TAMPA, FL 33602 US

**FEI Number:** 59-2401831

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RAYMOND, J. PAUL  
625 COURT STREET  
SUITE 200  
CLEARWATER, FL 33756 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:** J. PAUL RAYMOND

04/04/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name PICCIANO, JOHN R  
Address 201 N FRANKLIN ST #1910  
City-State-Zip: TAMPA FL 33602

Title SD  
Name O'SHEA, JAMES  
Address 201 N FRANKLIN ST #1910  
City-State-Zip: TAMPA FL 33602

Title D  
Name COHEN, ROBERT M  
Address 201 N FRANKLIN ST #1910  
City-State-Zip: TAMPA FL 33602

*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:** JOHN R PICCIANO

D

04/04/2024

Electronic Signature of Signing Officer/Director Detail

Date