DOCUMENT# F97000006264						
Entity Name: WINDMOOR HEALTHCARE OF PINELLAS PARK, INC.						
Current Princ						
367 S. GULPH RE	D.					
KING OF PRUSS	A, PA 19406					
Current Mailin	ng Address:					
367 S. GULPH	IRD					
	SSIA, PA 19406					
FEI Number:	59-3480410		Certifica			
Name and Address of Current Registered Agent:						
CORPORATE SERVICE COMPANY						
1201 HAYS ST TALLAHASSEE, FL 32301 US						
TALLAHASSEE, I	2 32301 03					
The above named e	ntity submits this statement for the purpose	e of changing its registered office or re	gistered agent, o			
SIGNATURE:						
	Electronic Signature of Registered A	Agent				
	с с					
Officer/Direct	or Detail :					
Title	/P, DIRECTOR	Title	PRESIDE			

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# E9700006264

ENT, DIRECTOR FILTON, STEVE T FILTON, STEVE Name Name 367 S. GULPH RD. Address Address 367 S. GULPH RD. KING OF PRUSSIA PA 19406 **__**. MATTHEW D BULPH RD. F PRUSSIA PA 19406

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: STEVE FILTON

VICE PRESIDENT

04/08/2020

Date



ate of Status Desired: No

or both, in the State of Florida.

City-State-Zip:	KING OF PRUSSIA PA 19406	City-State-Zip:	KING OF
Title	т	Title	SEC
Name	RAMAGANO, CHERLY K	Name	KLEIN, M
Address	367 S. GULPH RD.	Address	367 S. GL
City-State-Zip:	KING OF PRUSSIA PA 19406	City-State-Zip:	KING OF