## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000447502

Entity Name: WILLCARE ASSOCIATES, LLC

**Current Principal Place of Business:** 

6271 CRESTED EAGLE LANE NOKOMIS, FL 34275

**Current Mailing Address:** 

6271 CRESTED EAGLE LANE NOKOMIS, FL 34275 US

FEI Number: 20-0671185 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CROSS STREET CORPORATE SERVICES, LLC 50 CENTRAL AVENUE, 8TH FLOOR, SARASOTA, FL 34236 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

FILED Jan 20, 2024

**Secretary of State** 

3959307194CC

Authorized Person(s) Detail:

Title MGR

Name MOATS, WILLA ANN

Address 6271 CRESTED EAGLE LANE

City-State-Zip: NOKOMIS FL 34275

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLA ANN MOATS

OWNER / PROPRIETOR

01/20/2024