

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000043057

**Entity Name:** GWN SECURITIES, INC.

**Current Principal Place of Business:**

11440 NORTH JOG ROAD  
SUITE 101  
PALM BEACH GARDENS, FL 33418-1766

**Current Mailing Address:**

11440 NORTH JOG ROAD  
SUITE 101  
PALM BEACH GARDENS, FL 33418-1766

**FEI Number:** 65-0939556

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC  
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 D  
Name WALSH, KATHLEEN  
Address 11440 NORTH JOG ROAD, SUITE 101  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DP  
Name WALSH, DENIS S  
Address 11440 NORTH JOG ROAD, SUITE 101  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title S  
Name WALSH, MARY T  
Address 11440 NORTH JOG ROAD, SUITE 101  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VP  
Name RITTMAN, BARRY  
Address 11440 NORTH JOG ROAD, SUITE 101  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title VICE PRESIDENT  
Name COGNETTI, LAURA  
Address 11440 NORTH JOG ROAD  
SUITE 101  
City-State-Zip: PALM BEACH GARDENS FL 33418-1766

*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:** DENIS WALSH

**PRESIDENT**

**02/22/2023**

Electronic Signature of Signing Officer/Director Detail

Date