

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000000568

**Entity Name:** GENNEX LLC

**Current Principal Place of Business:**

2740 SW MARTIN DOWNS BLVD., 266  
266  
PALM CITY, FL 34990

**Current Mailing Address:**

PO BOX 1523  
STUART, FL 34995 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GENNEX LLC  
2740 SW MARTIN DOWNS BLVD., 266  
266  
PALM CITY, FL 34990 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:** PAT HIGDON

01/29/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name HIGDON, PATRICIA  
Address PO BOX 1523  
City-State-Zip: STUART FL 34995

*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:** HIGDON , PATRICIA

MGR

01/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date