

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000153505

**Entity Name:** GAN CONSULTING LLC

**Current Principal Place of Business:**

2730 N MCMULLEN BOOTH RD.  
SUITE 100  
CLEARWATER, FL 33761

**Current Mailing Address:**

2730 N MCMULLEN BOOTH RD.  
SUITE 100  
CLEARWATER, FL 33761 US

**FEI Number:** 83-1003458

**Certificate of Status Desired:** No

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

NIEDZWIECK, GERALD A  
2730 N MCMULLEN BOOTH RD.  
SUITE 100  
CLEARWATER, FL 33761 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

**Authorized Person(s) Detail :**

Title MGR  
Name NIEDZWIECK, GERALD A  
Address 2730 N MCMULLEN BOOTH RD.,  
SUITE 100  
City-State-Zip: CLEARWATER FL 33761

Title MGR  
Name NIEDZWIECKI, MICHELE  
Address 2730 N MCMULLEN BOOTH RD.,  
SUITE 100  
City-State-Zip: CLEARWATER FL 33761

Title AMBR  
Name NIEDZWIECK, GERALD A  
Address 2730 N MCMULLEN BOOTH RD.,  
SUITE 100  
City-State-Zip: CLEARWATER FL 33761

*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:** GERALD NIEDZWIECKI

04/30/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail Date