

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000040708

**Entity Name:** GENESIS CAPITAL GROUP, LLC

**Current Principal Place of Business:**

18545 AVOCET DRIVE  
LUTZ, FL 33558

**FILED**  
**Jan 30, 2021**  
**Secretary of State**  
**5116677424CC**

**Current Mailing Address:**

18545 AVOCET DRIVE  
LUTZ, FL 33558 US

**FEI Number: 30-1226372**

**Certificate of Status Desired: No**

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

ROBINSON, FREDERICK D  
18545 AVOCET DRIVE  
LUTZ, FL 33558 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 AMBR  
Name ROBERTSON, LENORE  
Address 3301 BAYSHORE BLVD #2108  
City-State-Zip: TAMPA FL 33629

Title AMBR  
Name ROBINSON, KATINA L  
Address 18545 AVOCET DRIVE  
City-State-Zip: LUTZ FL 33558

Title AMBR  
Name ROBERTSON, DARRELL  
Address 3301 BAYSHORE BLVD  
City-State-Zip: TAMPA FL 33629

Title AMBR  
Name ROBINSON, FREDERICK D  
Address 18545 AVOCET DRIVE  
City-State-Zip: LUTZ FL 33558

*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: FREDERICK D. ROBINSON**

**AMBR**

**01/30/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date