

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000050563

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Entity Name:** GENCO ENTERPRISES LLC

**Current Principal Place of Business:**

4429 CROOKED BROOK COURT  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

4429 CROOKED BROOK COURT  
JACKSONVILLE, FL 32224

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

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

WILLIAMS, PAUL J  
4429 CROOKED BROOK COURT  
JACKSONVILLE, FL 32224 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WILLIAMS, PAUL J  
Address: 4429 CROOKED BROOK COURT  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: MGR  
Name: WILLIAMS, NELLANA R  
Address: 4429 CROOKED BROOK COURT  
City-St-Zip: JACKSONVILLE, FL 32224 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** PAUL J WILLIAMS

MGR

01/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date