

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34237

Entity Name: GENESIS PROGRAMS, INC.**Current Principal Place of Business:**1505 NE 26 ST
WILTON MANORS, FL 33305**Current Mailing Address:**1505 NE 26 ST
WILTON MANORS, FL 33305**FEI Number: 65-0151941****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**FITZGERALD, J. PATRICK
110 MERRICK WAY
SUITE 3-B
CORAL GABLES, FL 33134 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	PRES
Name	WENSKI, THOMAS ARCHBIS
Address	1505 NE 26 ST
City-State-Zip:	WILTON MANORS FL 33305

Title	CEO
Name	ROUTSIS-ARROYO, PETER
Address	1505 NE 26 ST
City-State-Zip:	WILTON MANORS FL 33305

Title	CFO
Name	JONES, JULES
Address	1505 NE 26 ST
City-State-Zip:	WILTON MANORS FL 33305

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PETER ROUTSIS-ARROYO**CHIEF EXECUTIVE
OFFICER****02/23/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date