## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000012735

**Entity Name: BROADWAY GENESIS LLC** 

**Current Principal Place of Business:** 

1010 NORTH MACINNES PLACE

TAMPA. FL 33602

**Current Mailing Address:** 

1010 NORTH MACINNES PLACE TAMPA. FL 33602 US

FEI Number: 27-1862461 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

City-State-Zip:

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGRM Title MGR

TAMPA BAY PERFORMING ARTS Name Name SILBIGER, MARTIN L

CENTER. INC.

TAMPA FL 33602

1010 NORTH MACINNES PLACE Address Address 1010 NORTH MACINNES PLACE

City-State-Zip: TAMPA FL 33602 City-State-Zip: TAMPA FL 33602

Title MGR Title MGR

Name MARSHALL, GENE Name SCHER, DAVID

Address 1010 NORTH MACINNES PLACE Address 1010 NORTH MACINNES PLACE

TAMPA FL 33602 City-State-Zip: City-State-Zip: TAMPA FL 33602

Title **CAFO** 

Title MGR Name ROSSI, MARY BETH

WEST, BILL Name Address

1010 NORTH MACINNES PLACE 1010 NORTH MACINNES PLACE Address

City-State-Zip: TAMPA FL 33602 TAMPA FL 33602 City-State-Zip:

Title MGR

Title MGR LEVINE, BARRY Name

Name MEZER, STEVE 1010 NORTH MACINNES PLACE Address

1010 NORTH MACINNES PLACE Address City-State-Zip: TAMPA FL 33602

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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.

04/19/2022 SIGNATURE: MARY BETH ROSSI **CAFO** 

Electronic Signature of Signing Authorized Person(s) Detail

Date

**FILED** Apr 19, 2022

**Secretary of State** 

3618549774CC

## **Authorized Person(s) Detail Continued:**

Title CEO Title MGR

Name LISI, JUDITH Name KIRKLAND, JACK

Address 1010 NORTH MACINNES PLACE Address 1010 NORTH MACINNES PLACE

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