

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000123865

**Entity Name:** 5428 GENE CIRCLE WPB LLC

**Current Principal Place of Business:**

5428 GENE CIR.  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

400 N FEDERAL HWY  
202N  
BOYNTON BEACH, FL 33435 US

**FEI Number:** 82-1262687

**Certificate of Status Desired:** No

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

JIMENEZ, LUCRECIA G  
400 N FEDERAL HWY 202N  
BOYNTON BEACH, FL 33435 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	Title	ASST. SECRETARY
Name	JIMENEZ, LUCRECIA G	Name	CRISANTY, ORNELLA
Address	400 N FEDERAL HWY 202N	Address	311 TOPEKA RD
City-State-Zip:	BOYNTON BEACH FL 33435	City-State-Zip:	PENSACOLA FL 32514

*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:** LUCRECIA G JIMENEZ

**MGR**

**02/28/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date