

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000160784

Entity Name: GENESIS CLINICAL RESEARCH, LLC

Current Principal Place of Business:

4710 N. HABANA AVENUE, STE. 300
TAMPA, FL 33614

Current Mailing Address:

4710 N. HABANA AVENUE, STE. 300
TAMPA, FL 33614

FEI Number: 59-3516399

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAVARRO, JESUS O
4302 WEST BEACH PARK DRIVE
TAMPA, FL 33609 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
Name NAVARRO, JESUS O
Address 4302 WEST BEACH PARK DRIVE
City-State-Zip: TAMPA FL 33609

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: JESUS NAVARRO

MD

03/02/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date