## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000019435

Entity Name: GOULD COOKSEY FENNELL, PLLC.

**Current Principal Place of Business:** 

979 BEACHLAND BLVD VERO BEACH, FL 32963

**Current Mailing Address:** 

979 BEACHLAND BLVD VERO BEACH, FL 32963 US

FEI Number: 59-1426911 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MARINE, CHRISTOPHER H ESQ 979 BEACHLAND BLVD VERO BEACH, FL 32963 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

FILED Jan 25, 2023

**Secretary of State** 

2930423862CC

Authorized Person(s) Detail:

Title PRESIDENT, MGR Title VF

NameFENNELL, TODD W ESQ.NameMARINE, CHRISTOPHER HAddress1435 SHORELANDS DRIVEAddress2229 WEST OCEAN OAKS CIR.

City-State-Zip: VERO BEACH FL 32963 City-State-Zip: VERO BEACH FL 32963

Title VP Title VP

NameHAFNER, TROY BNameCARTER, DAVID MAddress4664 VIA CLARICEAddress1575 GRACEWOOD LNCity-State-Zip:SANTA BARBARA CA 93111City-State-Zip:VERO BEACH FL 32963

Title VP Title VP

NameODOM, JASON LNameRENNICK, SANDRA GAddress380 FARLEY'S COURTAddressP.O. BOX 643282

City-State-Zip: VERO BEACH FL 32968 City-State-Zip: VERO BEACH FL 32964

Title VP Title VP

NameKIRK, WILLIAM NNameGUETTLER, ANTHONY PAddressP.O. BOX 643027Address7 SEA HORSE LANECity-State-Zip:VERO BEACH FL 32964City-State-Zip: VERO BEACH FL 32960

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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.

SIGNATURE: TODD W FENNELL PRESIDENT 01/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

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

Title VPTitle  $\mathsf{VP}$ 

ROBERTS, DILLON L. Name Name LARSON, JUSTIN K. Address 950 25TH STREET Address 1550 56TH COURT City-State-Zip: VERO BEACH FL 32966

City-State-Zip: VERO BEACH FL 32960

VΡ Title

Name ULLIAN, DANE R.

Address 2805 TROPICAL AVENUE City-State-Zip: VERO BEACH FL 32960