## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000176336

Entity Name: GCG HEALTHCARE SOLUTIONS LLC

**Current Principal Place of Business:** 

19046 BRUCE B DOWNS #1333

TAMPA. FL 33647

**Current Mailing Address:** 

19046 BRUCE B DOWNS BLVD #1333 TAMPA. FL 33647 US

FEI Number: 85-1724268 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702 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 Feb 02, 2022

**Secretary of State** 

8639162392CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

Name GUSTAVE, SHAYTEL E Name COLE, CIARA J

Address 33191 AZALEA RIDGE DR Address 981 HOUND CHASE DR.

City-State-Zip: WESLEY CHAPEL FL 33545 City-State-Zip: GIBSONTON FL 33534

Title AMBR Title AMBR

NameGRIFFITH, YASHICA INameBIASE, BRIAN AAddress3226 PLEASANT WILLOW CT.Address807 LENNA AVECity-State-Zip:BRANDON FL 33511City-State-Zip:SEFFNER FL 33584

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: CIARA COLE OWNER 02/02/2022