

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000258222

**Entity Name:** GENCARE KIDS PPEC + LEARNING CENTER ORLANDO, LLC

**Current Principal Place of Business:**

12200 MENTA STREET #101-105  
ORLANDO, FL 32837

**Current Mailing Address:**

12200 MENTA STREET #101-105  
ORLANDO, FL 32837 US

**FEI Number:** 93-1698122

**Certificate of Status Desired:** No

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

CORPORATION COMPANY OF ORLANDO  
300 SOUTH ORANGE AVE  
STE 1600 (JSE)  
ORLANDO, FL 32801 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	MGR
Name	GAYE, OLIVE	Name	ROWE, PAUL
Address	12200 MENTA STREET #101-105	Address	12200 MENTA STREET #101-105
City-State-Zip:	ORLANDO FL 32837	City-State-Zip:	ORLANDO FL 32837

*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:** PAUL ROWE

**MANAGER**

**03/31/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date