## **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000002970

Entity Name: GENOA HEALTHCARE LLC

**Current Principal Place of Business:** 

707 SOUTH GRADY WAY SUITE 700

RENTON, WA 98057

**Current Mailing Address:** 

707 SOUTH GRADY WAY SUITE 700

RENTON, WA 98057 US

FEI Number: 27-0556097 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD SUITE 4 PLANTATION, FL 33324 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 PRESIDENT Title MANAGER

Name DOUGLAS, JOSEPH SCOTT Name DOUGLAS, JOSEPH SCOTT

Address 707 SOUTH GRADY WAY Address 707 SOUTH GRADY WAY

SUITE 700 SUITE 700

City-State-Zip: RENTON WA 98057 City-State-Zip: RENTON WA 98057

Title CHIEF FINANCIAL OFFICER\* Title MANAGER

Name VOSS, ANDREW Name MULLIN, THOMAS [NMN]

Address 707 SOUTH GRADY WAY Address 707 SOUTH GRADY WAY

SUITE 700 SUITE 700

City-State-Zip: RENTON WA 98057 City-State-Zip: RENTON WA 98057

Title COO Title TREASURER

Name GUPTAIL, WILLIAM ROBERT Name GILL, PETER MARSHALL

Address 707 SOUTH GRADY WAY Address 707 SOUTH GRADY WAY

SUITE 700 SUITE 700

City-State-Zip: RENTON WA 98057 City-State-Zip: RENTON WA 98057

 Title
 DIRECTOR OF TAX\*
 Title
 VP, TAX SERVICES\*

 Name
 ZUERN, MAKENZIE
 Name
 KELLY, JOHN WILLIAM

Address 707 SOUTH GRADY WAY Address 707 SOUTH GRADY WAY

SUITE 700 SUITE 700

City-State-Zip: RENTON WA 98057 City-State-Zip: RENTON WA 98057

## Continues on page 2

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: HEATHER ANASTASIA LANG ASSISTANT SECRETARY 04/24/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 24, 2021

Secretary of State

1920597479CC

## Authorized Person(s) Detail Continued:

**ASSISTANT TREASURER\*** Title Name RUNICE, PAUL TIMOTHY Address 707 SOUTH GRADY WAY

SUITE 700

RENTON WA 98057 City-State-Zip:

ASSISTANT SECRETARY Title LANG, HEATHER ANASTASIA Name Address 707 SOUTH GRADY WAY

SUITE 700

RENTON WA 98057 City-State-Zip:

Title **SECRETARY** 

PETERSON, KAREN ELIZABETH Name

Address 707 SOUTH GRADY WAY

SUITE 700

City-State-Zip: RENTON WA 98057

Title **ASSISTANT TREASURER\*** Name MCGLINCH, THOMAS SHAUN

Address 707 SOUTH GRADY WAY

SUITE 700

RENTON WA 98057 City-State-Zip:

Title ASSISTANT SECRETARY Name HINES, KIRSTEN COLLEEN Address 707 SOUTH GRADY WAY

SUITE 700

RENTON WA 98057 City-State-Zip: