

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000007500

Entity Name: INGLESINO, WEBSTER, WYCISKALA & TAYLOR, LLC**Current Principal Place of Business:**600 PARSIPPANY RD STE 204
PARSIPPANY, NJ 07054**Current Mailing Address:**600 PARSIPPANY RD STE 204
PARSIPPANY, NJ 07054 US**FEI Number:** 27-2537561**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NORTHWEST REGISTERED AGENT LLC
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

Authorized Person(s) Detail :

Title MBR
Name TAYLOR, LISA D
Address 600 PARSIPPANY RD STE 204
City-State-Zip: PARSIPPANY NJ 07054

Title MBR
Name WEBSTER, ELNARDO J
Address 600 PARSIPPANY RD STE 204
City-State-Zip: PARSIPPANY NJ 07054

Title MBR
Name DRISCOLL, DENIS F
Address 600 PARSIPPANY RD STE 204
City-State-Zip: PARSIPPANY NJ 07054

Title MBR
Name INGLESINO, JOHN P
Address 600 PARSIPPANY RD STE 204
City-State-Zip: PARSIPPANY NJ 07054

Title MBR
Name WYCISKALA, JOHN P
Address 600 PARSIPPANY RD STE 204
City-State-Zip: PARSIPPANY NJ 07054

Title MBR
Name GRIECO, NICHOLAS A
Address 600 PARSIPPANY RD STE 204
City-State-Zip: PARSIPPANY NJ 07054

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: LISA D. TAYLOR**PARTNER****01/31/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date