

**2016 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A13000000438

**Entity Name:** BREAKAWAY EQUESTRIAN ENTERPRISES LIMITED PARTNERSHIP

**FILED**  
**Mar 16, 2016**  
**Secretary of State**  
**CC1897529549**

**Current Principal Place of Business:**

2625 MUIRFIELD COURT  
WELLINGTON, FL 33414

**Current Mailing Address:**

2625 MUIRFIELD COURT  
WELLINGTON, FL 33414 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

STEVEN K. BAIRD, P.A.  
5981 NE 6TH AVENUE  
MIAMI, FL 33137 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

**General Partner Detail :**

Document # N13000007431  
Name MUIRFIELD BREEN, INC.  
Address 2625 MUIRFIELD COURT  
City-State-Zip: WELLINGTON FL 33414

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: ELIZABETH BREEN

D

03/16/2016

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date