

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S93143

**FILED**  
**Apr 12, 2013**  
**Secretary of State**  
**CC5863173314**

**Entity Name:** TRIPLE CROWN REALTY OF OCALA, INC.

**Current Principal Place of Business:**

1740 E SLIVER SPRINGS BLVD  
OCALA, FL 34470

**Current Mailing Address:**

1740 E SLIVER SPRINGS BLVD  
OCALA, FL 34470

**FEI Number: 59-3095549**

**Certificate of Status Desired: No**

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

JOHN PLUNKETT  
1740 E SILVER SPRINGS BLVD  
OCALA, FL 34470 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

**Officer/Director Detail :**

Title	P	Title	VP
Name	KATHLEEN PLUNKETT	Name	PLUNKETT, JOHN
Address	7302 SE 12 CIR	Address	1809 SE 7TH ST
City-State-Zip:	OCALA FL 34480	City-State-Zip:	OCALA FL 34470

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: KATHLEEN PLUNKETT**

**P**

**04/12/2013**

Electronic Signature of Signing Officer/Director Detail

Date