

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000069030

**Entity Name:** TRIPLE PLAY FISHING TEAM, LLC

**Current Principal Place of Business:**

3710 NE 27TH TERRACE  
LIGHTHOUSE POINT, FL 33064

**Current Mailing Address:**

3710 NE 27TH TERRACE  
LIGHTHOUSE POINT, FL 33064 US

**FEI Number:** 45-5378892

**Certificate of Status Desired:** No

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

MCLAUGHLIN, GREGORY A  
110 SE 6TH STREET  
15TH FLOOR  
FORT LAUDERDALE, FL 33301 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 AUTHORIZED MEMBER  
Name MCLAUGHLIN, GREGORY A  
Address 3710 NE 27TH TERRACE  
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title AUTHORIZED MEMBER  
Name REPETSKI, MARK S  
Address 4241 NE 25TH AVENUE  
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title AUTHORIZED MEMBER  
Name SCHUTZ, ANTON V  
Address 3710 NE 27TH TERRACE  
City-State-Zip: LIGHTHOUSE POINT FL 33064

*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:** GREGORY A. MCLAUGHLIN

**AUTHORIZED MEMBER**

**01/25/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date