

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000093809

**Entity Name:** SWIMMING TRIATHLON AND ATHLETIC DEVELOPMENT PROFESSIONALS, LLC

**Current Principal Place of Business:**

1141 BEL AIRE DR W  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

1141 BEL AIRE DR W  
PEMBROKE PINES, FL 33027 US

**FEI Number: 46-0745514**

**Certificate of Status Desired: No**

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

GAMORY, THADDEUS  
1141 BEL AIRE DR W  
PEMBROKE PINES, FL 33027 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: THADDEUS GAMORY

04/24/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	AUTHORIZED MEMBER
Name	GAMORY, THADDEUS	Name	POINTER-GAMORY, NOAH V
Address	1141 BEL AIRE DR W	Address	138 TERRACE PARK
City-State-Zip:	PEMBROKE PINES FL 33027	City-State-Zip:	ROCHESTER NY 14619

*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: THADDEUS GAMORY

MANAGING MEMBER

04/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date