

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000120642

**Entity Name:** TRIPLE CROWN OF STUART, LLC

**Current Principal Place of Business:**

2400 SE FEDERAL HIGHWAY, 4TH FL  
STUART, FL 34994

**Current Mailing Address:**

P.O. BOX 954  
STUART, FL 34995 US

**FEI Number:** 46-3630167

**Certificate of Status Desired:** No

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

NORMAN, KENNETH A  
2400 SE FEDERAL HIGHWAY, 4TH FL  
STUART, FL 34994 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 MGR  
Name O'BRYAN, DEANNA  
Address 4437 SAVAGE DRIVE  
City-State-Zip: LOUISVILLE FL 40216

*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:** DEANNA O'BRYAN

**MANAGER**

**01/09/2017**

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

\_\_\_\_\_  
Date