

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000121256

**Entity Name:** ATHLETIC TRAINING WHEELS, LLC

**Current Principal Place of Business:**

7201 LAKETREE DRIVE  
RALEIGH, NC 27615

**Current Mailing Address:**

7201 LAKETREE DRIVE  
RALEIGH, NC 27615 US

**FEI Number:** 47-4670800

**Certificate of Status Desired:** No

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

MCCREA, RYAN  
7810 S DIXIE HWY  
ATTN: RYAN R MCCREA  
WEST PALM BEACH, FL 33405 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	Title	AMBR
Name	MCCREA, ELIZABETH S	Name	MCCREA, ELIZABETH S
Address	7201 LAKETREE DRIVE	Address	7201 LAKETREE DRIVE
City-State-Zip:	RALEIGH NC 27615	City-State-Zip:	RALEIGH NC 27615
Title	MGR	Title	AMBR
Name	MCCREA, RYAN R	Name	MCCREA, RYAN R
Address	7201 LAKETREE DRIVE	Address	7201 LAKETREE DRIVE
City-State-Zip:	RALEIGH NC 27615	City-State-Zip:	RALEIGH NC 27615

*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:** ELIZABETH S MCCREA

**MGR**

**08/14/2017**

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

\_\_\_\_\_  
Date