

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000178008

**Entity Name:** COMPASS RESEARCH CYCLING TEAM, LLC

**Current Principal Place of Business:**

303 GENIUS DRIVE  
WINTER PARK, FL 32789

**Current Mailing Address:**

303 GENIUS DRIVE  
SUITE 450  
WINTER PARK, FL 32789 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CORPORATION COMPANY OF ORLANDO  
303 GENIUS DRIVE  
SUITE 450  
WINTER PARK, FL 32789 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 MBR  
Name STANTON, SEAN  
Address 303 GENIUS DRIVE  
City-State-Zip: WINTER PARK FL 32789

Title MBR  
Name CURTIS, DR. CRAIG  
Address 303 GENIUS DRIVE  
City-State-Zip: WINTER PARK FL 32789

Title MBR  
Name LAZARUS, JASON  
Address 303 GENIUS DRIVE  
City-State-Zip: WINTER PARK FL 32789

Title MBR  
Name BELL, BRENT  
Address 303 GENIUS DRIVE  
City-State-Zip: WINTER PARK FL 32789

Title MBR  
Name LEONARD, JEFF  
Address 303 GENIUS DRIVE  
City-State-Zip: WINTER PARK FL 32789

*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:** SEAN STANTON

**MGR**

**02/09/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date