

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000269899

**Entity Name:** TRIPLE TREE RANCH EVENT MANAGEMENT, LLC

**Current Principal Place of Business:**

8550 BLUEFIELD RD  
OKEECHOBEE, FL 34974

**Current Mailing Address:**

PO BOX 4502  
TEQUESTA, FL 33469

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MATTHEWS, GEORGE G JR  
8550 BLUEFIELD RD  
OKEECHOBEE, FL 34974 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 MATTHEWS, GEORGE G JR  
Address 8550 BLUEFIELD RD  
City-State-Zip: OKEECHOBEE FL 34974

Title MGR  
Name AUDITORE, CARL A  
Address 7515 PINE TREE LANE  
City-State-Zip: WEST PALM BEACH FL 33406

*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:** CARL A. AUDITORE

**MANAGER**

**02/06/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date