

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138842

FILED
Apr 09, 2007
Secretary of State

Entity Name: TRIPLE CROWN CORPORATION OF CHEROKEE INC

Current Principal Place of Business:

P.O. BOX 1243
ELLENTON, FL 34222

New Principal Place of Business:

4186 16TH ST. EAST
ELLENTON, FL 34222

Current Mailing Address:

P.O. BOX 1243
ELLENTON, FL 34222

New Mailing Address:

FEI Number: 58-2647166 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOLL, DAVID D SR.
2707 7TH AVE. WEST
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: DOLL, DAVID D SR.
Address: 2707 7TH AVE. WEST
City-St-Zip: BRADENTON, FL 34205

Title: VP () Delete
Name: DOLL, NICHOLAS B
Address: P.O. BOX 1243
City-St-Zip: ELLENTON, FL 34222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: DOLL, DAVID D SR.
Address: 4186 16TH ST. EAST
City-St-Zip: ELLENTON, FL 34222

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID D. DOLL SR

PRES

04/09/2007

Electronic Signature of Signing Officer or Director

Date