

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000062653

Entity Name: TRIPLETT FAMILY LLC

Current Principal Place of Business:

189 LONG LAKE RD
HAWTHORNE, FL 32606

Current Mailing Address:

189 LONG LAKE RD
HAWTHORNE, FL 32606 US

FEI Number: 65-0470964

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRIPLETT, THOMAS E JR.
189 LONG LAKE RD
HAWTHORNE, FL 32606 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: THOMAS E. TRIPLETT, JR.

04/24/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name TRIPLETT, THOMAS E JR.
Address 189 LONG LAKE RD
City-State-Zip: HAWTHORNE FL 32640

Title MGRM
Name TRIPLETT, GAY J
Address 187 LONG LAKE ROAD
City-State-Zip: HAWTHORNE FL 32640

Title MGRM
Name TRIPLETT, GLEE A
Address 981 FAIRFIELD DRIVE
City-State-Zip: MARIETTA GA 30068

Title MGRM
Name JOY T SEGALL, TRUSTEE
Address 179 LONG LAKE ROAD
City-State-Zip: HAWTHORNE FL 32640

Title MGRM
Name RICHARD SEGALL, TRUSTEE
Address 179 LONG LAKE ROAD
City-State-Zip: HAWTHORNE FL 32640

Title MBR
Name TRIPLETT, LINDA F
Address 189 LONG LAKE RD
City-State-Zip: HAWTHORNE FL 32640

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: LINDA F TRIPLETT

MEMBER

04/24/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date