

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000001803

**Entity Name:** TRIPLE CROWN CONSTRUCTION, LLC

**Current Principal Place of Business:**

762 LANCER CIRCLE  
OCOE, FL 34761

**Current Mailing Address:**

762 LANCER CIRCLE  
OCOE, FL 34761 US

**FEI Number:** 46-1710906

**Certificate of Status Desired:** No

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

LUTCHMAN, CLINT  
762 LANCER CIRCLE  
OCOE, FL 34761 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	MGRM	Title	MGRM
Name	LUTCHMAN, CLINT	Name	LUTCHMAN, AMANDA
Address	762 LANCER CIRCLE	Address	762 LANCER CIRCLE
City-State-Zip:	OCOE FL 34761	City-State-Zip:	OCOE FL 34761

*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:** CLINT LUTCHMAN

**MGRM**

**04/14/2016**

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

\_\_\_\_\_  
Date