

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000001803

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

**Current Principal Place of Business:**

3820 SALMON DR.  
ORLANDO, FL 32825

**Current Mailing Address:**

6419 LAKEVILLE RD.  
ORLANDO, FL 32818 US

**FEI Number:** 46-1710906

**Certificate of Status Desired:** No

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

LUTCHMAN, CLINT  
3820 SALMON DR.  
ORLANDO, FL 32825 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  
Name LUTCHMAN, CLINT  
Address 3820 SALMON DR.  
City-State-Zip: ORLANDO FL 32825

Title MGRM  
Name LUTCHMAN, AMANDA  
Address 3820 SALMON DR.  
City-State-Zip: ORLANDO FL 32825

*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

03/28/2019

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

\_\_\_\_\_  
Date