

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000000730

**Entity Name:** ALWYN STABLES LLC

**Current Principal Place of Business:**

685 SW 89TH TER  
OCALA, FL 34481

**Current Mailing Address:**

2775 NW 49TH AVE  
STE 205 PMB 369  
OCALA, FL 34482 US

**FEI Number:** 92-1456099

**Certificate of Status Desired:** No

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

BURKE, KATELYN  
685 SW 89TH TER  
OCALA, FL 34481 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	MBR	Title	MGR
Name	BURKE, KATELYN	Name	DIFFEY, SCOTT
Address	685 SW 89TH TER	Address	685 SW 89TH TERRACE
City-State-Zip:	OCALA FL 34481	City-State-Zip:	OCALA FL 34481

*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:** KATELYN BURKE

MBR

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date