

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED  
Mar 14, 2002 8:00 am  
Secretary of State**

03-14-2002 90083 008 \*\*\*\*55.00

DOCUMENT # L01000021899

1. Entity Name

BIG TEN HOLDINGS, LLC

**DO NOT WRITE IN THIS SPACE**

B0039574

2. Principal Place of Business

3240 CAPITAL CIRCLE, SW

Suite, Apt. #, etc.

3. Mailing Address

3240 Capital Circle SW

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Tallahassee, FLORIDA

City & State  
Tallahassee, FLORIDA

4. FEI Number

Applied For  
 Not Applicable

Zip 32310

Country LEON

Zip 32310

Country LEON

5. Certificate of Status Desired

\$5.00 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name FRANK S LOCKWOOD

Street Address (P.O. Box Number is Not Acceptable)

505 EAST 6TH AVENUE

City Tallahassee

FL

Zip Code 32303

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FEE IS \$50.00  
Make Check Payable to Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS / MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
MGRM	KEVIN HARRINGTON	3240 CAPITAL CIRCLE SW	TALLAHASSEE, FL 32310				
MGRM	STEPHEN C. HUNTSBARGER	3240 CAPITAL CIRCLE SW	Tallahassee, FL 32310				
MGRM	FRANK S. LOCKWOOD	3240 CAPITAL CIRCLE SW	Tallahassee, FL 32310				

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: *Frank Lockwood* FRANK S LOCKWOOD

2/25/02 850-521-8782

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/01)