

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000048125

**FILED**  
**Apr 06, 2010**  
**Secretary of State**

**Entity Name:** LGG CONSULTING SERVICE, LLC

**Current Principal Place of Business:**

1143 JOEL BLVD.  
LEHIGH ACRES, FL 33972

**New Principal Place of Business:**

1143 JOEL BLVD.  
LEHIGH ACRES, FL 33936

**Current Mailing Address:**

1143 JOEL BLVD.  
LEHIGH ACRES, FL 33972

**New Mailing Address:**

1143 JOEL BLVD.  
LEHIGH ACRES, FL 33936

**FEI Number:** 26-0157588

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARRIS, LAWRENCE A  
1143 JOEL BLVD.  
LEHIGH ACRES, FL 33972 US

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

BARRIS, LAWRENCE A  
1143 JOEL BLVD.  
LEHIGH ACRES, FL 33936 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

04/06/2010

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BARRIS, LAWRENCE A  
Address: 1143 JOEL BLVD.  
City-St-Zip: LEHIGH ACRES, FL 33936

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: LAWRENCE A. BARRIS

MGR

04/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date