

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000013897

FILED
Jul 19, 2009
Secretary of State

Entity Name: BIG SHOT STABLE, LLC

Current Principal Place of Business:

212 HIGHLAND WOODS DRIVE
SAFETY HARBOR, FL 34695 US

New Principal Place of Business:

212 HIGHLAND WOODS DRIVE
212 HIGHLAND WOODS DR
SAFETY HARBOR, FL 34695 US

Current Mailing Address:

212 HIGHLAND WOODS DRIVE
SAFETY HARBOR, FL 34695 US

New Mailing Address:

212 HIGHLAND WOODS DRIVE
212 HIGHLAND WOODS DR
SAFETY HARBOR, FL 34695 US

FEI Number: 26-1942347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MCCANCE, GEORGETTE
212 HIGHLAND WOODS DRIVE
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCCANCE, GEORGETTE
Address: 212 HIGHLAND WOODS DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: MGRM () Delete
Name: MCCANCE, JOHN
Address: 208 BRUSHY HILL ROAD
City-St-Zip: DANBURY, CT 06810 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: GEORGETTE MCCANCE

PRES

07/19/2009

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