

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000022423

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** BIGLIA CONTRACT SERVICES, LLC

**Current Principal Place of Business:**

1150 PONCE DE LEON BLVD  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

1150 PONCE DE LEON BLVD  
BROOKSVILLE, FL 34601

**New Mailing Address:**

**FEI Number:** 61-1563110

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JEFF, WALZ  
7202 PERIWINKLE CT  
BROOKSVILLE, FL FL 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  
**Name:** WALZ STABLES, LLC  
**Address:** 7202 PERIWINKLE CT  
**City-St-Zip:** BROOKSVILLE, FL 34602 US

**Title:** MGR  
**Name:** WORSLEY, TIMOTHY  
**Address:** 940 CEDAR DR  
**City-St-Zip:** BROOKSVILLE, FL 34601 US

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:** JEFF WALZ

MGRM

03/04/2010

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