

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000089089

**Entity Name:** BISON MANAGEMENT SOLUTIONS, LLC

**Current Principal Place of Business:**

3225 S. MACDILL AVENUE  
STE 129-236  
TAMPA, FL 33629

**Current Mailing Address:**

3225 S. MACDILL AVENUE  
STE 129-236  
TAMPA, FL 33629

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SIGETY, C. BIRGE  
3225 S. MACDILL AVE  
STE. 129-236236  
TAMPA, FL 33629 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 MGR  
Name SIGETY, C. BIRGE  
Address 3225 S. MACDILL AVE., STE.129-236  
City-State-Zip: TAMPA FL 33629

Title VP  
Name SIGETY, ELIZABETH P  
Address 3225 S. MACDILL AVE. STE.129-236  
City-State-Zip: TAMPA FL 33629

Title VP  
Name SIGETY, AUSTIN D  
Address 3225 S. MACDILL AVE. STE.129-236  
City-State-Zip: TAMPA FL 33629

*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:** AUSTIN SIGETY

**VICE PRESIDENT**

**02/23/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date