

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000014297

**FILED**  
**Jan 21, 2011**  
**Secretary of State**

**Entity Name:** SEDITA KILTON LIFE & WEALTH MANAGEMENT, LLC

**Current Principal Place of Business:**

104 N. EVERS STREET, SUITE 202  
PLANT CITY, FL 33563

**New Principal Place of Business:**

**Current Mailing Address:**

104 N. EVERS STREET, SUITE 202  
PLANT CITY, FL 33563

**New Mailing Address:**

**FEI Number:** 26-2030917

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEDTA, JOSEPH E  
104 N. EVERS STREET, SUITE 202  
PLANT CITY, FL 33563 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: SEDITA, JOSEPH E  
Address: 104 N. EVERS STREET, SUITE 202  
City-St-Zip: PLANT CITY, FL 33563

Title: MGR  
Name: KILTON, NATHAN A  
Address: 104 N. EVERS STREET, SUITE 202  
City-St-Zip: PLANT CITY, FL 33563

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: JOSEPH E. SEDITA

MGRM

01/21/2011

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