

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000081514

**Entity Name:** IDR KNOWLEDGE SOLUTIONS LLC

**Current Principal Place of Business:**

1940 SE 56TH COURT  
OCALA, FL 34480

**Current Mailing Address:**

PO BOX 830789  
OCALA, FL 34483 US

**FEI Number:** 46-2964982

**Certificate of Status Desired:** No

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

YODER, ANGELINE  
1940 SE 56TH COURT  
OCALA, FL 34480 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 MGRM  
Name YODER, ANGELINE  
Address 1940 SE 56TH COURT  
City-State-Zip: Ocala FL 34480

Title MGRM  
Name NOVY, LAURIE  
Address PO BOX 830789  
City-State-Zip: Ocala FL 34483

*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:** ANGELINE YODER

**MANAGING MEMBER**

**04/30/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date