

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000003458

**Entity Name:** KELTON COMPANY, L.L.C.

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

220 WEST GARDEN STREET, SUITE 605  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 230  
PENSACOLA, FL 32591

**New Mailing Address:**

**FEI Number:** 59-1872454

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SYLTE, THOMAS W  
220 WEST GARDEN STREET, SUITE 605  
PENSACOLA, FL 32501 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:** MGR  
**Name:** SYLTE, THOMAS W  
**Address:** 220 WEST GARDEN STREET, SUITE 605  
**City-St-Zip:** PENSACOLA, FL 32501

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: THOMAS W SYLTE

MGR

04/26/2011

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