

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010406

FILED  
Jan 05, 2010  
Secretary of State

Entity Name: KELLYPACE, LLC

**Current Principal Place of Business:**

215 NORTH JEFFERSON STREET  
MONTICELLO, FL 32344 US

**New Principal Place of Business:**

**Current Mailing Address:**

215 NORTH JEFFERSON STREET  
MONTICELLO, FL 32344 US

**New Mailing Address:**

FEI Number: 20-2338013

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KELLY, BARRY P  
215 NORTH JEFFERSON STREET  
MONTICELLO, FL 32344 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: KELLY, BARRY P  
Address: 215 NORTH JEFFERSON STREET  
City-St-Zip: MONTICELLO, FL 32344 US

Title: MGR  
Name: KELLY, PAM  
Address: 215 NORTH JEFFERSON STREET  
City-St-Zip: MONTICELLO, FL 32344 US

Title: MGR  
Name: PACE, JOHN  
Address: 1507 W. JULIA STREET  
City-St-Zip: PERRY, FL 32347 US

Title: MGR  
Name: PARKER-PACE, NELDA  
Address: 1507 W. JULIA ST  
City-St-Zip: PERRY, FL 32347 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: NELDA PARKER-PACE

MGR

01/05/2010

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