

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057857

Entity Name: KICK BIT SOLUTIONS, LLC

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

663 PINE CREST LN.
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

663 PINE CREST LN.
NAPLES, FL 34104

New Mailing Address:

FEI Number: 11-3753278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORTNER, JAMES H
663 PINE CREST LN.
NAPLES, FL 34104-951 US

Name and Address of New Registered Agent:

FORTNER, JAMES H
663 PINE CREST LN.
NAPLES, FL 341049519 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:

04/13/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FORTNER, JAMES H
Address: 663 PINE CREST LN.
City-St-Zip: NAPLES, FL 341049519

Title: MGRM () Delete
Name: FORTNER, LORINDA C
Address: 663 PINE CREST LN.
City-St-Zip: NAPLES, FL 341049519

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: JAMES H FORTNER

MGRM

04/13/2006

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