

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000029407

FILED
Aug 16, 2009
Secretary of State

Entity Name: KEYSTROKE SOLUTIONS LLC

Current Principal Place of Business:

2572 BOOTS RD
LAKELAND, FL 33810

New Principal Place of Business:

Current Mailing Address:

P O BOX 531
KATHLEEN, FL 338490531

New Mailing Address:

FEI Number: 26-2201590 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KEKOOLANI, BARBARA M
2572 BOOTS RD
LAKELAND, FL 33810 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KEKOOLANI, JODIE K
Address: 10023 REMINGTON DR
City-St-Zip: RIVERVIEW, FL 33578

Title: MGR () Delete
Name: KEKOOLANI, BARBARA M
Address: 2572 BOOTS RD
City-St-Zip: LAKELAND, FL 33810

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 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: BARBARA M KEKOOLANI

MGR

08/16/2009

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