

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000053835

Entity Name: KILOBITCONSULTING, LLC

**FILED**  
**Jan 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

851 WEST PENNSYLVANIA AVE  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

851 WEST PENNSYLVANIA AVE  
DELAND, FL 32720

**New Mailing Address:**

FEI Number: 26-4837031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

YORKE, KEVIN D  
851 WEST PENNSYLVANIA AVE  
DELAND, FL 32720 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: MGRM  
Name: YORKE, KENDAL D  
Address: 524 NORTH HIGH STREET  
City-St-Zip: DELAND, FL 32720

Title: MGR  
Name: LUE-YORKE, DEBRA A  
Address: 851 WEST PENNSYLVANIA AVE  
City-St-Zip: DELAND, FL 32720

Title: MGRM  
Name: YORKE, KEVIN D  
Address: 851 WEST PENNSYLVANIA AVE  
City-St-Zip: DELAND, FL 32720

Title: MGRM  
Name: COATES, ROWAN JR.  
Address: 518 SUNNY ACRES  
City-St-Zip: ST.CROIX , U.S.V.I, VI 00823 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: KEVIN YORKE

PRES

01/18/2011

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