

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000095304

Entity Name: KYTE CENTRIFUGE, LLC

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

14368 NOTTINGHAM WAY CIRCLE  
ORLANDO, FL 32828 US

**New Principal Place of Business:**

10 E. OWL CREEK LANE  
FAIRVIEW, NC 28730 US

**Current Mailing Address:**

14368 NOTTINGHAM WAY CIRCLE  
ORLANDO, FL 32828 US

**New Mailing Address:**

10 E. OWL CREEK LANE  
FAIRVIEW, NC 28730 US

FEI Number: 27-3414465

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KYTE, DAVID  
14368 NOTTINGHAM WAY CIRCLE  
ORLANDO, FL 32828 US

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

ENGLERT, LEITE & MARTIN, PL  
3855 AVALON PARK BLVD. E.  
ORLANDO, FL 32828 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: JENNIFER ENGLERT

03/23/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KYTE, DAVID  
Address: 10 E. OWL CREEK LANE  
City-St-Zip: FAIRVIEW, NC 28730 US

Title: MGRM  
Name: KYTE, AMY P  
Address: 10 E. OWL CREEK LANE  
City-St-Zip: FAIRVIEW, NC 28730 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: DAVID KYTE

PRES

03/23/2012

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