

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000127036

FILED  
Jan 17, 2011  
Secretary of State

Entity Name: KB SUPPORT SERVICES, LLC

**Current Principal Place of Business:**

1990 MAIN STREET  
SUITE 801  
SARASOTA, FL 34236 US

**New Principal Place of Business:**

**Current Mailing Address:**

1990 MAIN STREET  
SUITE 801  
SARASOTA, FL 34236 US

**New Mailing Address:**

FEI Number: 27-4284261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LPS CORPORATE SERVICES, INC.  
46 NORTH WASHINGTON BOULEVARD  
SUITE 1  
SARASOTA, FL 34236 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: CLARKE, ROBERT P  
Address: 1990 MAIN STREET, SUITE 801  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR  
Name: LANE, ROBERT J  
Address: 1990 MAIN STREET, SUITE 801  
City-St-Zip: SARASOTA, FL 34236 US

Title: MRG  
Name: HARGREAVES, KATHLEEN A  
Address: 1990 MAIN STREET, SUITE 801  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR  
Name: JONES, BARBARA A  
Address: 1990 MAIN STREET, SUITE 801  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR  
Name: EBERSOLE, BETH C  
Address: 1990 MAIN STREET, SUITE 801  
City-St-Zip: SARASOTA, FL 34236 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: ROBERT P. CLARKE

MGR

01/17/2011

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