

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000058750

**FILED**  
**Feb 14, 2012**  
**Secretary of State**

**Entity Name:** BYTE SIZE IT, LLC

**Current Principal Place of Business:**

670 STALLINGS AVE  
DELTONA, FL 32738

**New Principal Place of Business:**

**Current Mailing Address:**

670 STALLINGS AVE  
DELTONA, FL 32738

**New Mailing Address:**

**FEI Number:** 45-2379544

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCGUIRE, TIMOTHY L  
670 STALLINGS AVE  
DELTONA, FL 32738 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:** MCGUIRE, TIMOTHY L  
**Address:** 670 STALLINGS AVE  
**City-St-Zip:** DELTONA, FL 32738

**Title:** MGRM  
**Name:** KRAVCHAK, JUSTIN F  
**Address:** 670 STALLINGS AVE  
**City-St-Zip:** DELTONA, FL 32738

**Title:** MGRM  
**Name:** WALRAVEN, MICHAEL P  
**Address:** 13325 BISCAYNE DR  
**City-St-Zip:** GRAND ISLAND, FL 32735

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:** TIMOTHY L MCGUIRE

MGRM

02/14/2012

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