

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117790

Entity Name: IT MUST BE LOVE, LLC

FILED
Jan 27, 2009
Secretary of State

Current Principal Place of Business:

19460 CROMWELL CT
SUITE 105
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

C/O ROBERT D. ROYSTON, JR.
PO DRAWER 60205
FORT MYERS, FL 33906

New Mailing Address:

C/O JOHN M. WICKER, P.A.
PO DRAWER 60205
FORT MYERS, FL 33906

FEI Number: 20-8046062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICKER, JOHN M PA
12670 NEW BRITTANY BLVD., SUITE 101
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

WICKER, JOHN M
12670 NEW BRITTANY BLVD., SUITE 101
FORT MYERS, FL 33907 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: JOHN M. WICKER

01/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SMITH, JULIANA C
Address: 19460 CROMWELL CT SUITE 105
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES:

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: JULIANA C. SMITH

MGRM

01/27/2009

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