

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075764

Entity Name: GOTTA BE FUNI, LLC

FILED  
May 01, 2008  
Secretary of State

**Current Principal Place of Business:**

5880 PRECISION DRIVE  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

127 SOUTH LAWSONA BOULEVARD  
ORLANDO, FL 32801 US

**New Mailing Address:**

5880 PRECISION DR.  
ORLANDO, FL 32819 US

FEI Number: 20-3238547      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

HABER, LAWRENCE H  
800 CELEBRATION AVENUE  
SUITE 227  
CELEBRATION, FL 34747 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 ( ) Delete  
Name: ABRAHAM, JEFF  
Address: 127 SOUTH LAWSONA BOULEVARD  
City-St-Zip: ORLANDO, FL 32801 US

Title: MGR ( ) Delete  
Name: DOBBS, GREGG  
Address: 1103 OAKDALE STREET  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEFFREY ABRAHAM

MGR

05/01/2008

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