

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003924

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** MUST BE THE MONEY, L.L.C.

**Current Principal Place of Business:**

2515 NORTHBROOKE PLAZA DR., SUITE 102  
NAPLES, FL 34119

**New Principal Place of Business:**

2590 NORTHBROOKE PLAZA DR., SUITE 104  
NAPLES, FL 34119

**Current Mailing Address:**

2515 NORTHBROOKE PLAZA DR., SUITE 102  
NAPLES, FL 34119

**New Mailing Address:**

2590 NORTHBROOKE PLAZA DR., SUITE 104  
NAPLES, FL 34119

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CHAPMAN, SHERRI  
2515 NORTHBROOKE PLAZA DR., SUITE 102  
NAPLES, FL 34119 US

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

CHAPMAN, SHERRI  
2590 NORTHBROOKE PLAZA DR., SUITE 104  
NAPLES, FL 34119 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:

03/17/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LOMAN, GREG  
Address: 2590 NORTHBROOKE PLAZA DR., SUITE 104  
City-St-Zip: NAPLES, FL 34119

Title: MGRM  
Name: LOMAN, MARYELLA  
Address: 2590 NORTHBROOKE PLAZA DR., SUITE 104  
City-St-Zip: NAPLES, FL 34119

Title: MGRM  
Name: CHAPMAN, SHERRI  
Address: 2590 NORTHBROOKE PLAZA DR., SUITE 104  
City-St-Zip: NAPLES, FL 34119

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: SHERRI CHAPMAN

MGRM

03/17/2011

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