

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090283

FILED  
Mar 22, 2009  
Secretary of State

Entity Name: IT BETTER BE, LLC

**Current Principal Place of Business:**

1590 WOODLAND AVE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

1590 WOODLAND AVE  
WINTER PARK, FL 32789

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

TURNER, JEFFREY S  
1590 WOODLAND AVE  
WINTER PARK, FL 32789 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 ( ) Delete  
Name: TURNER, JEFFREY S  
Address: 1590 WOODLAND AVE  
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM ( ) Delete  
Name: TURNER, DONITA C  
Address: 1590 WOODLAND AVE  
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM ( ) Delete  
Name: WALKER, RICHARD L JR  
Address: 39733 LAKE NORRIS ROAD  
City-St-Zip: EUSTIS, FL 32736

Title: MGRM ( ) Delete  
Name: WALKER, PATRICIA  
Address: 39733 LAKE NORRIS ROAD  
City-St-Zip: EUSTIS, FL 32736

**ADDITIONS/CHANGES:**

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

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

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 S TURNER

MGRM

03/22/2009

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