## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000081862

Entity Name: IDA BELLE, LLC

## **Current Principal Place of Business:**

1700 DR ML KING ST N B ST. PETERSBURG, FL 33704

# **Current Mailing Address:**

1700 DR ML KING ST N B ST. PETERSBURG, FL 33704

## FEI Number: 27-0768202

## Name and Address of Current Registered Agent:

RAWLS, KATHLEEN 1700 DR ML KING ST N. B ST. PETERSBURG, FL 33704 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:

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Authorized Ferson(s) Detail.			
Title	MGRM	Title	MGRM
Name	RAWLS, KATHLEEN	Name	RAWLS, ED
Address	1700 DR ML KING ST N., STE B	Address	1700 DR ML KING ST N., STE B
City-State-Zip:	ST. PETERSBURG FL 33704	City-State-Zip:	ST. PETERSBURG FL 33704

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

### SIGNATURE: KATHLEEN RAWLS

MANAGING MEMBER 01/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date

Date

Certificate of Status Desired: No