2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

5/3

FILED
Jun 21, 2004 8:00 am
Secretary of State
05-03-2004 90116 030 ****50.00

DOCUMENT # L03000017797

1. Entity Name

HALF VENTURES DEVELOPMENT OF FLORIDA, LLC

34008817

MOORE CR2E083 (11/03)

Principal Place of Business	Mailing Address
5100 NORTH OCEAN BOULEVARD #205 FORT LAUDERDALE FL 33308	5100 NORTH OCEAN BOULEVARD #205 FORT LAUDERDALE FL 33308

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 11-3716585 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HUGHES, M. DANIEL 3000 NORTH FEDERAL HIGHWAY BLDG TWO SOUTH STE. 200 FORT LAUDERDALE FL 33306	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State!
Due By May 1, 2004

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MD ☐ Delete Arker, Michael IRA 5100 N. OCEAN. Blvd APT 205 Ft. Lauderdale FL 33308	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ☐ Delete MATTISON, TAMARA G 12340 Ocean Forest Drive Dallas TX 75230	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ☐ Delete HAMILTON, JAMES 300 Carriage Court South Lake TX 76092	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ☐ Delete Dillon Partnership LLC 509 Bryon Court Erving TX 75038	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: [signature] Michael Arker 4/29/2004 954-816-5273
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #