2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 16, 2005
Secretary of State

DOCUMENT# L03000028020

Entity Name: HALFTIME ENTERPRISES LLC

Current Principal Place of Business:

6565 BEACH BLVD. STE 41
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

6565 BEACH BLVD. STE 41
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 20-0779722 **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:

MONTGOMERY, LARRY
142 CESSNA DR
YULE, FL 32097 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/MEMBERS:

Title: MGRM ( ) Delete
Name: LB GRACE,
Address: 6565 BEACH BOULEVARD, SUITE 41
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILFORD MCCORMICK MNGR 05/16/2005

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