2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 17, 2011
Secretary of State

DOCUMENT# L03000028020

Entity Name: HALFTIME ENTERPRISES LLC

Current Principal Place of Business:

3537 HARTSFIELD ROAD
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

3537 HARTSFIELD ROAD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 20-0779722 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCORMICK, WILFORD
6807 TAMRA LANE
JACKSONVILLE, FL 32216 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
Name: LB GRACE
Address: PO BOX 15148
City-St-Zip: JACKSONVILLE, FL 32239

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 Statues.

SIGNATURE: WILFORD MCCORMICK RA 02/17/2011

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