

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088371

Entity Name: HALCYON PARTNERS LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

25066 RIDGE OAK DRIVE
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

25066 RIDGE OAK DRIVE
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 32-0130827 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:

Name and Address of New Registered Agent:

CICCONE, RON
25066 RIDGE OAK DRIVE
BONITA SPRINGS, FL 34134 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

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CICCONE, RON
Address: 25066 RIDGE OAK DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGRM () Delete
Name: CICCONE, JOAN
Address: 25066 RIDGE OAK DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES:

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: RON CICCONE

MGRM

05/01/2008

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