2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000056989

Entity Name: CYCLE OPS, LLC.

FILED Jan 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2219 GARDEN ST 711 GARDEN ST

TITUSVILLE, FL 32796 US TITUSVILLE, FL 32796 US

Current Mailing Address: New Mailing Address:

2839 DUTTON DR

TITUSVILLE, FL 32796 US

FEI Number: 26-0270373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ERICKSEN, JENNIFER ERICKSEN, JENNIFER L 2839 DUTTON DR 2839 DUTTON DR

TITUSVILLE, FL 32796 US TITUSVILLE, FL 32796 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: JENNIFER L ERICKSEN 01/26/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ERICKSEN, JENNIFER
Address: 2839 DUTTON DR

City-St-Zip: TITUSVILLE, FL 32796 US

 Title:
 MGRM () Delete

 Name:
 ERICKSEN, L. THOMAS

 Address:
 2839 DUTTON DR

 City-St-Zip:
 TITUSVILLE, FL 32796 US

Title: MGRM () Delete
Name: HAMILTON, NANCI
Address: 2700 STARLIGHT DR.

City-St-Zip: TITUSVILLE, FL 32796 US
Title: MGRM () Delete

 Name:
 HAMILTON, RYAN

 Address:
 2700 STARLIGHT DR.

 City-St-Zip:
 TITUSVILLE, FL 32796 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition Name: ERICKSEN, JENNIFER L

Address: 2839 DUTTON DR
City-St-Zip: TITUSVILLE, FL 32796 US

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: MGRM (X) Change () Addition

Name: HAMILTON, NANCI R Address: 2700 STARLIGHT DR. City-St-Zip: TITUSVILLE, FL 32796 US

Title: MGRM (X) Change () Addition

 Name:
 HAMILTON, RYAN E

 Address:
 2700 STARLIGHT DR.

 City-St-Zip:
 TITUSVILLE, FL 32796 US

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: JENNIFER L ERICKSEN MGRM 01/26/2009