

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000073003

Entity Name: HALF LIFE CYCLES LLC

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3271 CRAGGY BLUFF PLACE  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

3271 CRAGGY BLUFF PLACE  
COCOA, FL 32926

**New Mailing Address:**

FEI Number: 14-2005277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JENNINGS, ALLAN W  
3271 CRAGGY BLUFF PLACE  
COCOA, FL 32926 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: MGR  
Name: JENNINGS, ALLAN W  
Address: 3271 CRAGGY BLUFF PLACE  
City-St-Zip: COCOA, FL 32926 US

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 Statutes.

SIGNATURE: ALLAN JENNINGS

MGR

04/13/2010

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