

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000008053

FILED
Jan 30, 2009
Secretary of State

Entity Name: HALF CIRCLE L MANAGEMENT, LLC

Current Principal Place of Business:

C/O HALF CIRCLE F MANAGEMENT, LLP
2424 THORP ROAD
IMMOKALEE, FL 34142

New Principal Place of Business:

2424 THORP ROAD
IMMOKALEE, FL 34142

Current Mailing Address:

C/O HALF CIRCLE F MANAGEMENT, LLP
2424 THORP ROAD
IMMOKALEE, FL 34142

New Mailing Address:

2424 THORP ROAD
IMMOKALEE, FL 34142

FEI Number: 26-1824808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, CHARLES M JR.
2390 TAMiami TRAIL NORTH, SUITE 204
NAPLES, FL 34103 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 () Delete
Name: SCOFIELD, MICHAEL K
Address: 2424 THORP ROAD
City-St-Zip: IMMOKALEE, FL 34142

Title: MGRM () Delete
Name: SCOFIELD, DANE T
Address: 2424 THORP ROAD
City-St-Zip: IMMOKALEE, FL 34142

Title: MGRM () Delete
Name: SCOFIELD, MILES L
Address: 38 BANYAN ROAD
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES:

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

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: DANE THORP SCOFIELD

MGRM

01/30/2009

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