

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000103748

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** FULL CIRCLE COMMUNICATIONS LLC

**Current Principal Place of Business:**

80 SURFVIEW DRIVE  
SUITE 715  
PALM COAST, FL 32137 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 351879  
PALM COAST, FL 32135 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

HOLLEY, HOWARD M JR.  
80 SURFVIEW DRIVE  
SUITE 715  
PALM COAST, FL 32137 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: HOLLEY, HOWARD M JR.  
Address: 80 SURFVIEW DRIVE, SUITE 715  
City-St-Zip: PALM COAST, FL 32137 US

Title: MGRM  
Name: HOLLEY, HOWARD M SR.  
Address: 80 SURFVIEW DRIVE, SUITE 715  
City-St-Zip: PALM COAST, FL 32137 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: HOWARD M. HOLLEY, JR.

PR

02/18/2010

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