

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094041

FILED
Jan 09, 2007
Secretary of State

Entity Name: BLUE HULL PASSAGE, LLC

Current Principal Place of Business:

165 S. BEACH ROAD
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

165 S. BEACH ROAD
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 20-2137342 **FEI Number Applied For** () **FEI Number Not Applicable** () **Certificate of Status Desired** (X)

Name and Address of Current Registered Agent:

HAUSLEIN, JAMES N
165 S. BEACH ROAD
HOBE SOUND, FL 33455 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: HAUSLEIN, JAMES N
Address: 165 SOUTH BEACH ROAD
City-St-Zip: HOBE SOUND, FL 33455

Title: MGRM () Delete
Name: LAFORGE, W DANA
Address: 275 CENTRAL PARK WEST
City-St-Zip: NEW YORK, NY 10024

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 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: JAMES N. HAUSLEIN MGRM 01/09/2007

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