

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000110675

**FILED**  
**Jan 28, 2011**  
**Secretary of State**

**Entity Name:** BLUE GRAY EQUESTRIAN PARTNERS LLC

**Current Principal Place of Business:**

90 PARADE HILL LANE  
NEW CANAAN, CT 06840

**New Principal Place of Business:**

**Current Mailing Address:**

90 PARADE HILL LANE  
NEW CANAAN, CT 06840

**New Mailing Address:**

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

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

WEDGE ASSOCIATES LLC  
12230 FOREST HILL BLVD  
SUITE 210  
WELLINGTON, FL 33414 US

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

WEDGE ASSOCIATES LLC  
12230 FOREST HILL BLVD  
SUITE 200  
WELLINGTON, FL 33414 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/28/2011

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MAURICE C. PERKINS III REVOCABLE TRUST  
Address: 90 PARADE HILL LANE  
City-St-Zip: NEW CANAAN, CT 06840 US

Title: MGRM  
Name: DEBORAH W. PERKINS REVOCABLE TRUST  
Address: 90 PARADE HILL LANE  
City-St-Zip: NEW CANAAN, CT 06840 US

Title: MGR  
Name: WEDGE, WILLIAM J ESQ.  
Address: 12230 FOREST HILL BLVD, SUITE 200  
City-St-Zip: WELLINGTON, FL 33414

Title: MGR  
Name: PERKINS, MAURICE C III  
Address: 90 PARADE HILL LANE  
City-St-Zip: NEW CANAAN, CT 06840 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: WILLIAM J. WEDGE, ESQ.

MGR

01/28/2011

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