

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000000685

**FILED**  
**Sep 08, 2004**  
**Secretary of State**

**Entity Name:** BLUE MOUNTAIN BEACH HOLDINGS, L.L.C.

**Current Principal Place of Business:**

219 ROLLING DUNES DRIVE  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

219 ROLLING DUNES DRIVE  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 59-3713515

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRANKLIN H. WATSON, P.A.  
5365 E. HWY 30-A, SUITE 105  
SEAGROVE BEACH, FL 32459 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/MEMBERS:**

**Title:** MGR ( ) Delete  
**Name:** GREENE, ROY  
**Address:** 219 ROLLING DUNES DRIVE  
**City-St-Zip:** SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** GREENE, ROY M  
**Address:** 219 ROLLING DUNES DRIVE  
**City-St-Zip:** SANTA ROSA BEACH, FL 32459

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** ROY M. GREENE

MGR

09/08/2004

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