2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000006726

1. Entity Name
BLUE RIDGE MOUNTAIN PROPERTIES, LLC

FILED
Apr 06, 2006 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
P.O. BOX 23910	P.O. BOX 23910
FORT LAUDERDALE, FL 33307	FORT LAUDERDALE, FL 33307

DO NOT WRITE IN THIS SPACE

04032006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
65-1097972	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

MORGAN, PHILIP J ESQ
200 E LAS OLAS BLVD
SUITE 1900
FT LAUDERDALE, FL 33301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE
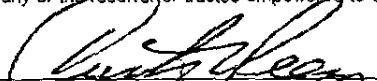
Filing Fee is $50.00
Due by May 1, 2006

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	DEEM, CURTIS
STREET ADDRESS	P.O. BOX 23910
CITY-ST-ZIP	FORT LAUDERDALE, FL 33307
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/20/06-80068-015 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____   4-3-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #