2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 11, 2005
Secretary of State

DOCUMENT# L01000004127

Entity Name: BLUE WATER PARTNERS LLC

Current Principal Place of Business:

1116 AVOCADO ISLE
FORT LAUDERDALE, FL 33315

New Principal Place of Business:

Current Mailing Address:

1116 AVOCADO ISLE
FORT LAUDERDALE, FL 33315

New Mailing Address:

P.O. BOX 350542
FORT LAUDERDALE, FL 33335

FEI Number: 65-1084211 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

AKERS, TIMOTHY R
P.O. BOX 350542
FT. LAUDERDALE, FL 33335 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: TIMOTHY R. AKERS 06/11/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: AKERS, TIMOTHY R
Address: 1116 AVOCADO ISLE
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: MGR ( ) Delete
Name: AKERS, CHRISTINA
Address: 1116 AVOCADO ISLE
City-St-Zip: FORT LAUDERDALE, FL 33315

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 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: TIMOTHY R. AKERS M/M 06/11/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date