LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 90997 029 ****50.00

DOCUMENT # L01000021935

Entity Name
BLUEWATER DEVELOPMENT OF SARASOTA, LLC

DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address
328 South Shore Dr	328 South Shore Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SARASOTA FL	City & State: SARASOTA FL
Zip: 34234 Country: USA	Zip: 34234 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 60-0000543 ☐ Applied For ☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name: SAM D. NORTON

Street Address (P.O. Box Number is Not Acceptable): 1819 MAIN ST SUITE 610

City: SARASOTA FL Zip Code: 34236

DO NOT WRITE IN THIS SPACE

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 ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

MANAGING MEMBERS/MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TIMOTHY J. MORRIS, MGR 328 South Shore Dr SARASOTA FL 34234	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E083B (12/01)

I hereby certify that the information supplied with this filing does not qualify 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 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 J. MORRIS MGR 4-22-03 (941) 360-9781
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #