2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 05, 2005
Secretary of State

DOCUMENT# L02000029070

Entity Name: BLUE DOLPHIN, L.L.C.

Current Principal Place of Business:

8826 GROW DRIVE
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

8826 GROW DRIVE
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 56-2302199 **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:

SWEETIN, GARY D
8826 GROW DRIVE
PENSACOLA, FL 32514 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/MANAGERS:

Title:	MGR	( ) Delete
Name:	SWEETON, GARY D	
Address:	8826 GROW DRIVE	
City-St-Zip:	PENSACOLA, FL 32514	
Title:	MGR	( ) Delete
Name:	EDELMAN, BRUCE	
Address:	8683 SCENIC HILLS DRIVE	
City-St-Zip:	PENSACOLA, FL 32514	
Title:	MGR	( ) Delete
Name:	MEAD, MICHAEL	
Address:	3862 BAYWIND DRIVE	
City-St-Zip:	GULF BREEZE, FL 32563	
Title:	MGR	( ) Delete
Name:	DE LUCA, SALVATORE L CFO	
Address:	3047 BRIGANTINE DRIVE	
City-St-Zip:	PENSACOLA, FL 32526	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: SALVATORE DE LUCA CFO 07/05/2005

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