

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90127 043 \*\*\*\*50.00

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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                                               |                                                                                                                                                                                                                                       |                                                        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|--|
| <b>DOCUMENT # L03000002623</b><br>1. Entity Name<br><b>BLUEWATER CONSTRUCTION, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                          |                                                               |                                                                                                                                                                                                                                       |                                                        |  |
| Principal Place of Business<br><b>1401 MANATEE AVE W<br/>STE 510<br/>BRADENTON, FL 34205</b>                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                          |                                                               | Mailing Address<br><b>1401 MANATEE AVE W<br/>STE 510<br/>BRADENTON, FL 34205</b>                                                                                                                                                      |                                                        |  |
| 2. Principal Place of Business<br><b>1401 Manatee Ave W<br/>Suite 500</b>                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                          | 3. Mailing Address<br><b>1401 Manatee Ave W<br/>Suite 500</b> |                                                                                                                                                                                                                                       |                                                        |  |
| Suite, Apt. #, etc.<br><b>Suite 500</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                          | Suite, Apt. #, etc.<br><b>Suite 500</b>                       |                                                                                                                                                                                                                                       |                                                        |  |
| City & State<br><b>Bradenton FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          | City & State<br><b>Bradenton FL</b>                           |                                                                                                                                                                                                                                       |                                                        |  |
| Zip<br><b>34205</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          | Country<br><b>USA</b>                                         |                                                                                                                                                                                                                                       | Zip<br><b>34205</b>                                    |  |
| Country<br><b>USA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          | 4. FEI Number<br><b>03-0503099</b>                            |                                                                                                                                                                                                                                       |                                                        |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                                               |                                                                                                                                                                                                                                       | Applied For<br><input type="checkbox"/> Not Applicable |  |
| 6. Name and Address of Current Registered Agent<br><br><b>SILBERSTEIN, DAVID M<br/>720 SOUTH ORANGE AVE.<br/>SARASOTA, FL 34236</b>                                                                                                                                                                                                                                                                                                                                                                           |                                                                          |                                                               | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |                                                        |  |
| 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.<br><br>SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____<br><small>Signature, typed or printed name of registered agent and title if applicable.</small>                                                                            |                                                                          |                                                               |                                                                                                                                                                                                                                       |                                                        |  |
| <b>Filing Fee is \$50.00<br/>Due by May 1, 2005</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          | <b>Make check payable to<br/>Florida Department of State</b>  |                                                                                                                                                                                                                                       |                                                        |  |
| <b>9. MANAGING MEMBERS/MANAGERS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          |                                                               | <b>10. ADDITIONS/CHANGES</b>                                                                                                                                                                                                          |                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>MGR<br/>MORRIS, TIM<br/>328 SOUTHSHORE DR.<br/>SARASOTA, FL 34243</b> |                                                               | <div style="text-align: right;"><input type="checkbox"/> Delete</div>                                                                                                                                                                 |                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <div style="text-align: right;"><input type="checkbox"/> Delete</div>    |                                                               | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <div style="text-align: right;"><input type="checkbox"/> Delete</div>    |                                                               | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <div style="text-align: right;"><input type="checkbox"/> Delete</div>    |                                                               | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <div style="text-align: right;"><input type="checkbox"/> Delete</div>    |                                                               | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <div style="text-align: right;"><input type="checkbox"/> Delete</div>    |                                                               | <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>                                                                                                                               |                                                        |  |
| 11. 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. |                                                                          |                                                               |                                                                                                                                                                                                                                       |                                                        |  |
| <b>SIGNATURE:</b> <i>Carolyn Mauro</i><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>                                                                                                                                                                                                                                                                                                                                                |                                                                          |                                                               | <div style="display: flex; justify-content: space-between;"> <span><b>4-28-05</b></span> <span><b>(941) 708-9220</b></span> </div> <small>Date Daytime Phone #</small>                                                                |                                                        |  |

*Carolyn Mauro*