

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006989

FILED
Jul 05, 2005
Secretary of State

Entity Name: BLUE MOON BALLROOM LLC

Current Principal Place of Business:

26251 S. TAMIAMI TR., #8
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

26251 S. TAMIAMI TR., #8
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 01-0766182 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:

TUCKER, BARBARA
1205 RESERVE WAY
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

TUCKER, BARBARA
28692 ALESSANDRIA CIRCLE
BONITA SPRINGS, FL 34135 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: BARBARA TUCKER

07/05/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: D () Delete
Name: TUCKER, BARBARA
Address: 1205 RESERVE WAY #202
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: TUCKER, BARBARA
Address: 28692 ALESSANDRIA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135

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: BARBARA TUCKER

PRES

07/05/2005

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