


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 25, 2004 8:00 am
Secretary of State

05-25-2004 90204 009 ****50.00

DOCUMENT # L03000007670 1. Entity Name BLUE MOUNTAIN BEACH GROUP, LLC					
Principal Place of Business 179 ROSEHILL DRIVE WEST TALLAHASSEE, FL 32312			Mailing Address 179 ROSEHILL DRIVE WEST TALLAHASSEE, FL 32312		
2. Principal Place of Business 2179 Miller Landing Road Suite, Apt. #, etc.		3. Mailing Address 2179 Miller Landing Road Suite, Apt. #, etc.			
City & State Tallahassee, Florida Zip 32312		City & State Tallahassee, Florida Zip 32312		4. FEI Number 33-1047306	
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent OOTEN, TERRY-B 179 ROSEHILL DRIVE WEST TALLAHASSEE, FL 32312			7. Name and Address of New Registered Agent Name Duncan Moore Street Address (P.O. Box Number is Not Acceptable) 2179 Miller Landing Road City Tallahassee FL Zip Code 32312		
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. SIGNATURE <u><i>Duncan Moore</i></u> (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OOTEN, TERRY B 179 ROSEHILL DRIVE WEST TALLAHASSEE, FL 32312	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Duncan Moore 2179 Miller Landing Road Tallahassee, Florida 32312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GLENER, STEPHEN 57 HIDDEN VILLAGE TRAIL HIGHLANDS, NC 28741	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCCULLERS, JAMES E 1280 MALIBU PLACE VESTAVIA HILLS, AL 35216	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
SIGNATURE: James E. McCullers SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			05/06/04 205 823 9139 Date Daytime Phone #		