2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000011429

1. Entity Name
BLUE LAGOON, LLC

Principal Place of Business	Mailing Address
709 E. 5TH STREET STUART, FL 34994	709 E. 5TH STREET STUART, FL 34994

02042005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3781014
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LARAWAY, BRUCE D
PO BOX 2714
57 E. SEMINOLE ST.
STUART, FL 34995

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

U00000218788
02/08/05-80001-012 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	LARAWAY, BRUCE D
STREET ADDRESS	57 E. SEMINOLE ST.
CITY-ST-ZIP	STUART, FL 34994
TITLE	MGRM
NAME	WAY, GEORGE E
STREET ADDRESS	318 N. TEJON
CITY-ST-ZIP	COLORADO SPRINGS, CO 80903
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ Mgr 2/1/05 772/220 3488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #