

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012968

FILED  
Apr 29, 2004  
Secretary of State

Entity Name: BLUE METHOD SOFTWARE, LLC

**Current Principal Place of Business:**

4311 NELSON AVE  
SARASOTA, FL 34231 US

**New Principal Place of Business:**

**Current Mailing Address:**

4311 NELSON AVE  
SARASOTA, FL 34231 US

**New Mailing Address:**

FEI Number: 56-2341923

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DOUGLAS, JEFFREY M  
4311 NELSON AVE  
SARASOTA, FL 34231 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: DOUGLAS, JEFF  
Address: 4311 NELSON AVE  
City-St-Zip: SARASOTA, FL 34231 US

Title: MGRM ( ) Delete  
Name: SOLLECITO, NICK  
Address: 236 E. 88TH ST #3RW  
City-St-Zip: NEW YORK, NY 10128 US

Title: MGRM (X) Delete  
Name: WEISS, FRED  
Address: 8420 ISLESWORTH CT APT. 15202  
City-St-Zip: SARASOTA, FL 34243 US

**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:

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: JEFFREY M DOUGLAS

MR.

04/29/2004

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