

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056596

**FILED**  
**Mar 27, 2005**  
**Secretary of State**

**Entity Name:** BLUE LANTERN CERAMIC STUDIO, LLC

**Current Principal Place of Business:**

2120 S. RIDGEWOOD AVENUE, SUITE 9  
EDGEWATER, FL 32141

**New Principal Place of Business:**

**Current Mailing Address:**

2120 S. RIDGEWOOD AVENUE, SUITE 9  
EDGEWATER, FL 32141

**New Mailing Address:**

**FEI Number:** 32-0102950

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, LAURIE BETH  
2120 S. RIDGEWOOD AVENUE, SUITE 9  
EDGEWATER, FL 32141 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:** THOMAS, LAURIE BETH  
**Address:** 2120 S. RIDGEWOOD AVENUE, SUITE 9  
**City-St-Zip:** EDGEWATER, FL 32141

**Title:** MGRM ( ) Delete  
**Name:** KENNETH RAYMOND THOM, AS  
**Address:** 2120 S. RIDGEWOOD AVENUE, SUITE 9  
**City-St-Zip:** EDGEWATER, FL 32141

**ADDITIONS/CHANGES:**

**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:** LAURIE BETH THOMAS

MGRM

03/27/2005

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