

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000020581

FILED
Jul 28, 2006
Secretary of State

Entity Name: BLOMQUIST-CALUSA COTTAGE, LLC

Current Principal Place of Business:

8009 HERB FARM DRIVE
BETHESDA, MD 20817

New Principal Place of Business:

Current Mailing Address:

8009 HERB FARM DRIVE
BETHESDA, MD 20817

New Mailing Address:

C/O WEST & FEINBERG, P.C.
4550 MONTGOMERY AVE., SUITE 775N
BETHESDA, MD 20814

FEI Number: 20-0878577 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:

RITCHIE, RONALD W ESQ
5129 CASTELLO DRIVE, STE. 4
NAPLES, FL 34103 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/MANAGERS:

Title: MGR () Delete
Name: BLOMQUIST, C. WILLIAM
Address: 8009 HERB FARM DRIVE
City-St-Zip: BETHESDA, MD 20817

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BLOMQUIST, C. WILLIAM
Address: 8009 HERB FARM DRIVE
City-St-Zip: BETHESDA, MD 20817

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: C. WILLIAM BLOOMQUIST

MGR

07/28/2006

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