

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026281

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: BLUE MOUNTAIN PRESERVE, L.L.C.

## Current Principal Place of Business:

1732 W. COUNTY HWY 30-A  
106  
SANTA ROASA BEACH, FL 32459

## Current Mailing Address:

1732 W. COUNTY HWY 30-A  
106  
SANTA ROASA BEACH, FL 32459

## New Principal Place of Business:

1732 W. COUNTY HWY 30-A  
SUITE 105  
SANTA ROASA BEACH, FL 32459

## New Mailing Address:

1732 W. COUNTY HWY 30-A  
SUITE 105  
SANTA ROASA BEACH, FL 32459

FEI Number: 74-3121013

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOSTER, WILLIAM S  
909 MAR WALT DRIVE, SUITE 1014  
FT. WALTON BEACH, FL 32547 US

## Name and Address of New Registered Agent:

MATTHEWS, DANA C  
MATTHEWS & HAWKINS, P.A.  
4475 LEGENDARY DRIVE  
DESTIN, FL 32541 US

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: DANA C. MATTHEWS

04/26/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: CRUM, G. BARTON  
Address: 5442 WOODSIDE CIRCLE  
City-St-Zip: MONTGOMERY, AL 36117

Title: MGRM ( ) Delete  
Name: PARNELL, CHARLES N III  
Address: 2130 ROSEMONT DRIVE  
City-St-Zip: MONTGOMERY, AL 36117

Title: MGRM ( ) Delete  
Name: PARNELL, CATHERIN N  
Address: 2130 ROSEMONT DRIVE  
City-St-Zip: MONTGOMERY, AL 36117

Title: MGRM ( ) Delete  
Name: PARNELL, JUSTIN M  
Address: 3244 SOUTHVIEW AVENUE  
City-St-Zip: MONTGOMERY, AL 36106

Title: MGRM ( ) Delete  
Name: FLETCHER, CHARLES T JR  
Address: 5564 WOODSIDE CIRCLE  
City-St-Zip: MONTGOMERY, AL 36117

Title: MGRM ( ) Delete  
Name: E&S INVESTMENTS, L.L. .C.  
Address: 57 HIGHWAY 87  
City-St-Zip: CALERA, AL 35040

## 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:

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 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: G. BARTON CRUM

MGRM

04/26/2007

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