

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043505

Entity Name: BLUE WATER IV, LLC

FILED
Apr 19, 2005
Secretary of State

Current Principal Place of Business:

701 N.W. 19TH STREET, SUITE 100
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

701 N.W. 19TH STREET, SUITE 100
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 20-1221436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAAVEDRA, DAMASO W
312 S.E. 17TH STREET
SECOND FLOOR
FORT LAUDERDALE, FL 33316 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: MGR () Delete
Name: O'LEARY, MICEAL J
Address: 701 N.W. 19TH STREET, SUITE 100
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: MGR () Delete
Name: PATEL, PRAKASH
Address: 701 N.W. 19TH STREET, SUITE 100
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: MGR () Delete
Name: SCHUMAN, PHILLIP R
Address: 60 BAY COLONY LANE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR () Delete
Name: SAAVEDRA, DAMASO W
Address: 312 S.E. 17TH STREET, SECOND FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33316

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:

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: PRAKASH PATEL

MGR

04/19/2005

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