

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054082

FILED
Jan 19, 2009
Secretary of State

Entity Name: BLUE MOON GROUP, LLC

Current Principal Place of Business:

129 DAWN LAUREN LANE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

129 DAWN LAUREN LANE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 20-1381109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAINEY, GENEVIEVE
129 DAWN LAUREN LANE
TALLAHASSEE, FL 32301 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: MGRM () Delete
Name: RAINEY, GENEVIEVE
Address: 129 DAWN LAUREN LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGRM () Delete
Name: KOJM, KATHY E
Address: 6843 TOM ROBERTS ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: MGRM () Delete
Name: CLEVINGER, RICK
Address: 139 HICKORY WOOD DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: MGRM () Delete
Name: SCOTT, RANDALL
Address: 6244 CRESTWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

Title: MGRM () Delete
Name: WATTS, JACKIE
Address: 5126 WOODLANE CIR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: TADPOLE VENTURES, LL, C
Address: 4004 BOBBIN BROOK CIR.
City-St-Zip: TALLAHASSEE, FL 32312

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:

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: GENEVIEVE RAINEY

MGRM

01/19/2009

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