

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091443

FILED
Apr 01, 2009
Secretary of State

Entity Name: BLUE WATER SPORT FISHING CLUB, LLC

Current Principal Place of Business:

6942 PHILLIPS PARKWAY DRIVE, N.
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 50648
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

FEI Number: 86-1124247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WICKER, JONATHAN C
6942 PHILLIPS PARKWAY DRIVE, N.
JACKSONVILLE, FL 32256 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: WICKER, JONATHAN C
Address: P.O. BOX 50648
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: MGRM () Delete
Name: SAIG, GREGORY
Address: PO BOX 50648
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: MGRM () Delete
Name: CHAPPELL, PERRY A
Address: PO BOX 50648
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

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:

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: GREGORY SAIG

MGRM

04/01/2009

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