

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 27, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90016 049 \*\*\*\*50.00

<b>DOCUMENT # L05000054598</b> 1. Entity Name <b>BLUE MARLIN ASSOCIATES, LLC</b>		
Principal Place of Business <b>1799 N. 9TH STREET LAFAYETTE, IN 47904</b>		Mailing Address <b>1799 N. 9TH STREET LAFAYETTE, IN 47904</b>
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Country



04212006 Chg-LLC CR2E083 (11/05)

4. FEI Number **20-3200263**  
 Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$5.00** Additional Fee Required

<b>6. Name and Address of Current Registered Agent</b>  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	<b>7. Name and Address of New Registered Agent</b> Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ <b>FL</b> Zip Code _____
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM</b> <input type="checkbox"/> Delete <b>HOOD, DAVID W</b> <b>8281 KRONLOKKEN LANE</b> <b>LAFAYETTE, IN 47909</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM</b> <input type="checkbox"/> Delete <b>ALBREGTS, SHANE F</b> <b>8281 KRONLOKKEN LANE</b> <b>LAFAYETTE, IN 47909</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM</b> <input type="checkbox"/> Delete <b>BROWN, DOUGLAS G</b> <b>6600 E. 300 NORTH</b> <b>LAFAYETTE, IN 47905</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** Douglas G Brown 7-24-06 (765) 742-0146  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**COPY ATTACHMENT**

DOCUMENT # L05000054598



1. Entity Name  
BLUE MARLIN ASSOCIATES, LLC

Principal Place of Business: 1799 N. 9TH STREET, LAFAYETTE, IN 47904  
Mailing Address: 1799 N. 9TH STREET, LAFAYETTE, IN 47904

20031602



2. Principal Place of Business Suite, Apt. #, etc.  
3. Mailing Address Suite, Apt. #, etc.

04212006 Chg-LLC CR2E083 (11/05)

City & State

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Applied For: Not Applicable

Zip Country Zip Country

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**7. Name and Address of New Registered Agent**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

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Street Address (P.O. Box Number is Not Acceptable)  
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TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP			CITY-ST-ZIP		

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SIGNATURE: Douglas G Brown 4-24-06 (765) 742-0146  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #



ATTORNEYS AT LAW

ATTACHMENT

20036602

April 24, 2006

WILLIAM K. BENNETT  
(1919-1998)

RICHARD A. BOEHNING

BRENT E. CLARY

ROGER WM. BENNETT

JAMES A. GOTHARD

ANDREW S. GUTWEIN

STUART P. BOEHNING

JASON W. BENNETT

CARA C. PUTMAN

KYLE B. MANDEVILLE

STUART R. GUTWEIN

*\* of counsel*

Division of Corporations  
P. O. Box 6478  
Tallahassee, FL 32314

RE: **Blue Marlin Associates, LLC**  
**Document Number: L05000054598**  
**My File No. 12242.1**

To Whom It May Concern:

Enclosed please find the 2006 Limited Liability Company Annual Report for Blue Marlin Associates, LLC together with a filing fee check in the sum of \$50.00.

I am enclosing an extra photocopy of the Report and a self-address stamped envelope for return of the filing fee receipt.

If you have any questions, please call me.

Sincerely,

BENNETT BOEHNING & CLARY

Andrew S. Gutwein

ASG:jam  
Enclosures

MAILING ADDRESS

P.O. BOX 469  
LAFAYETTE, INDIANA 47902-0469

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