2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000066170

1. Entity Name

BLUÉ TREE HOUSE & TRIM, LLC



Principal Prace of Business

Mailing Address

500 LAKEWOOD ROAD PENSACOLA, FL 32507

US

500 LAKEWOOD ROAD PENSACOLA, FL 32507

.

FILED Aug 18, 2008 08:00 AM Secretary of State



08112008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 04-3819479 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AWALT, RICHARD 500 LAKEWOOD ROAD PENSACOLA, FL 32507

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	named entity submits this statement for ions of registered agent.	the purpose of cha	anging its registered office or registered ag	gent, or both, in the State	of Florida. I am familiar with, and accep	t
SIGNATURE_						
Signature, typed or printed name of registered agent and title if applicable			(NOTE: Registered Agent signature required when reinstating)		DATE	
	E NOW!!! FEE IS \$138.75 by September 12, 2008		nce with s. 607.193(2)(b), F.S., the limit pany did not receive the prior notice.	iited		
9. MANAGING MEMBERS/MANAGERS						
加压	MGRM					
NAME	AWALT, RICHARD					
STREET ADDRESS	500 LAKEWOOD ROAD					
CITY-ST-ZIP	PENSACOLA, FL 32507			UQOO	000957781	

U00000957781 08/18/08-80002-011 138.75

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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: Johns Line

NAME STREET ADDRESS CITY-ST-ZIP

DATE: 8-13-08