

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000072943

**Entity Name:** BLUE MOUNTAIN FLORIDA, LLC

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3124 WEST ADDISON DR  
ALPHARETTA, GA 30022

**New Principal Place of Business:**

**Current Mailing Address:**  
PO BOX 4710  
ALPHARETTA, GA 30023

**New Mailing Address:**

**FEI Number:** 20-3202752      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 EAST PARK AVE.  
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: MGR  
Name: SMITH, SEAN S  
Address: 3124 WEST ADDISON DR  
City-St-Zip: ALPHARETTA, GA 30022

Title: MGR  
Name: SMITH, SCOTT S  
Address: 3100 WEST ADDISON DR  
City-St-Zip: ALPHARETTA, GA 30022

I hereby 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: SEAN S. SMITH

MGR

01/05/2010

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