2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: X

Apr 04, 2008 08:00 AN Secretary of State **DOCUMENT # L05000077414** 1. Entity Name BLUÉ HERON PARK DEVELOPMENT, LLC Principal Place of Business Mailing Address 5003 SHORE CREST CIRCLE SOUTH TAMPA, FL 33609 "US 5003 SHORE CREST CIRCLE SOUTH TAMPA, FL 33609" US 03212008 No Chg-LLC CR2E083 (12/07) Applied For 4. FEI Number 20-3261178 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required DO NOT WRITE 6. Name and Address of Current Registered Agent DARREY, SR, JEFFREY A 5003 SHORE CREST CIRCLE SOUTH TAMPA, FL 33609 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS TITLE NAME DARREY, SR, JEFFREY A STREET ADDRESS 5003 SHORE CREST CIRCLE SOUTH TAMPA, FL 33609 CITY-ST-ZIP MGR TITLE DARREY, JR. JEFFREY A NAME STREET ADDRESS 17814 SIMMS ROAD CITY-ST-ZIP ODESSA, FL 33556 NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

R, OR AUTHORIZED REPRESENTATIVE

FILED