

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096460

Entity Name: BLUE MILES FLORIDA, LLC

FILED  
Jul 01, 2006  
Secretary of State

**Current Principal Place of Business:**

202 NORTH LAKE SHORE DRIVE  
LEESBURG, FL 34788

**New Principal Place of Business:**

**Current Mailing Address:**

202 NORTH LAKE SHORE DRIVE  
LEESBURG, FL 34788

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

CRELEY, JACK  
202 NORTH LAKE SHORE DRIVE  
LEESBURG, FL 34788 US

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: CRELEY, JACK  
Address: 202 NORTH LAKE SHORE DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: MGRM ( ) Delete  
Name: CRELEY, CHERYL  
Address: 202 NORTH LAKE SHORE DRIVE  
City-St-Zip: LEESBURG, FL 34788

**ADDITIONS/CHANGES:**

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 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: JACK CRELEY

MGRM

07/01/2006

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