## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jan 29, 2008 8:00 am Secretary of State

01-29-2008 90065 012 \*\*\*138.75

CR2E083 (12/07)

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1. Entity Name
BLUEJAY HOLDINGS, LLC



Principal Place of Business

3119 MANATEE AVENUE WEST BRADENTON, FL 34205

Mailing Address

3119 MANATEE AVENUE WEST BRADENTON, FL 34205



## DO NOT WRITE IN THIS SPACE

4.	FEI Number		Applied For
	20-8143650		Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Rec	Additional juired

6. Name and Address of Current Registered Agent

HOONHOUT, ROBERT A 3119 MANATEE AVENUE WEST BRADENTON, FL 34205

## DO NOT WRITE IN THIS SPACE

01202008No Chg-LLC

8. The above the obligation	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or	poth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	NOWIII FEE IS \$138.75 71, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREENE, PHILIP WESTVIEW,MARSH LANE TAPOLOW MAIDENHE BERKSHIRE S <u>[6</u> ODF, ENGLAND,	AD	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BERRY, JENNIFER ANN LITTLE BRAMBLES, 14 LINCOLN HATCH LANE BUNNHAM BUCKINGHAMSHIRE SL1, ** THE	4D	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BERRY, THOMAS J LITTLE BRAMBLES, 14 LINCOLN HATCH LANE BUNNHAM BUCKINGHAMSHIRE SL1, 173	D DC	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	€∧	DGLAND IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby of	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

The recovering that the information supplied with this filling 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: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/20/2008

Daytime Phone #