

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000009106

Entity Name: BLUEJAY HOLDINGS, LLC

FILED
Feb 14, 2009
Secretary of State

Current Principal Place of Business:

3119 MANATEE AVENUE WEST
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

3119 MANATEE AVENUE WEST
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 20-8143650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOONHOUT, ROBERT A
3119 MANATEE AVENUE WEST
BRADENTON, FL 34205 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 () Delete
Name: GREENE, PHILIP
Address: WESTVIEW,MARSH LANE TAPOLW MAIDENHEAD
City-St-Zip: BERKSHIRE SL6 ODF, ENGLAND,

Title: MGR () Delete
Name: BERRY, JENNIFER ANN
Address: LITTLE BRAMBLES, 14 LINCOLN HATCH LANE
City-St-Zip: BUNNHAM BUCKINGHAMSHIRE, EN SL1 7HD

Title: MGR () Delete
Name: BERRY, THOMAS J
Address: LITTLE BRAMBLES, 14 LINCOLN HATCH LANE
City-St-Zip: BUNNHAM BUCKINGHAMSHIRE, EN SL1 7HD

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: PHILLIP GREENE

MGR

02/14/2009

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