2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 15, 2008
Secretary of State

DOCUMENT# L07000046362

Entity Name: BLUEWATER FINANCIAL SERVICES & INSURANCE GROUP, LLC

Current Principal Place of Business:

3400 US HWY 1 SOUTH
SUITE E
ST. AUGUSTINE, FL 32086 US

New Principal Place of Business:

138 PALM COAST PKWY NE
SUITE 136
PALM COAST, FL 32137 US

Current Mailing Address:

3400 US HWY 1 SOUTH
SUITE E
ST. AUGUSTINE, FL 32086 US

New Mailing Address:

138 PALM COAST PKWY NE
SUITE 136
PALM COAST, FL 32137 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
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:

ESSERY, JENNIFER R
308 D STREET
ST. AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

COMFORT, JOSEPH A
4 CEDARWWOD CT
PALM COAST, FL 32137 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: JOSEPH A. COMFORT 09/15/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ESSERY, JENNIFER R
Address: 308 D STREET
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: MGR ( ) Delete
Name: COMFORT, JOSEPH A
Address: 4 CEDARWOOD CT
City-St-Zip: PALM COAST, FL 32137 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: COMFORT, JOSEPH A
Address: 4 CEDARWOOD CT
City-St-Zip: PALM COAST, FL 32137 US

Title: MGR (X) Change ( ) Addition
Name: COMFORT, JOSEPH A
Address: 4 CEDARWWOD CT
City-St-Zip: PALM COAST, FL 32137 US

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: JOSEPH A COMFORT MGR 09/15/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date