

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000125378

Entity Name: BLUE ISLAND GROUP, LLC

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3545-1 ST. JOHNS BLUFF RD. SOUTH, STE 133  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

3545-1 ST. JOHNS BLUFF RD. SOUTH, STE 133  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 38-3826813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATTHEWS, P R  
6128 RALEIGH STREET, SUITE 1103  
ORLANDO, FL 32861 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: MGRM  
Name: PERI, FRANCIS W  
Address: 2245 WALKERS GLENN LANE  
City-St-Zip: JACKSONVILLE, FL 32224

I hereby 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: F W PERI

MGRM

02/17/2012

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