

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L39115

FILED  
Mar 20, 2006  
Secretary of State

Entity Name: BLUE HERON MANAGEMENT, INC.

## Current Principal Place of Business:

%RONALD ESSERMAN  
10455 NW 12TH STREET  
MIAMI, FL 33172

## New Principal Place of Business:

## Current Mailing Address:

%RONALD ESSERMAN  
10455 NW 12TH STREET  
MIAMI, FL 33172

## New Mailing Address:

FEI Number: 65-0164843      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ESSERMAN, RONALD  
10455 NW 12TH STREET  
MIAMI, FL 33172      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: ESSERMAN, RONALD  
Address: 10455 NW 12TH STREET  
City-St-Zip: MIAMI, FL 33172

Title: V ( ) Delete  
Name: HOCTOR, JOHN W  
Address: 10455 N.W. 12TH STREET  
City-St-Zip: MIAMI, FL 33172

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S ( ) Change (X) Addition  
Name: JARVIS, LYNN  
Address: 10455 N.W. 12TH STREET  
City-St-Zip: MIAMI, FL 33172

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN W. HOCTOR

V

03/20/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date