2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2006
Secretary of State

DOCUMENT# M01000001724

Entity Name: BLUE CHIP ADVISORS, L.L.C.

Current Principal Place of Business:

4210 WEST 99TH STREET
OVERLAND PARK, KS 66207

New Principal Place of Business:

7 PELICAN ISLE
FORT LAUDERDALE, FL 33301

Current Mailing Address:

4210 WEST 99TH STREET
OVERLAND PARK, KS 66207

New Mailing Address:

7 PELICAN ISLE
FORT LAUDERDALE, FL 33301

FEI Number: 48-1211904 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEONARD, MICHAEL D
7 PELICAN ISLE
FORT LAUDERDALE, FL 33301 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 ( ) Delete
Name: LEONARD, MICHAEL D
Address: 7 PELICAN ISLE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM ( ) Delete
Name: BOEGER, BRET M
Address: 10614 WEST 128TH STREET
City-St-Zip: OVERLAND PARK, FL 66210

Title: MGRM ( ) Delete
Name: BAUM, DAVID
Address: 7 PELICAN ISLE
City-St-Zip: FORT LAUDERDALE, FL 33301

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 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: MICHAEL D. LEONARD MR 01/12/2006

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