2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002516

Entity Name: BLUE WATER, LLC

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 510 AUSTIN STREET STE. GENEVIEVE, MO 63670 **Current Mailing Address: New Mailing Address:** 510 AUSTIN STREET STE. GENEVIEVE, MO 63670 FEI Number: 56-2509884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LYON, M. CHRISTOPHER 125 S. GADSDEN STREET, 3RD FLOOR TALLAHASSEE, FL 32301 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete KLEIN, URBAN Name: Name: 510 AUSTIN STREET Address: Address: City-St-Zip: STE. GENEVIEVE, MO 63670 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KLEIN, VIRGINIA Name: Name: Address: 510 AUSTIN STREET Address: City-St-Zip: STE. GENEVIEVE, MO 63670 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KLEIN, JOHN Name: Name: Address: 7331 NOTTINGHAM AVE. Address: City-St-Zip: ST. LOUIS, MO 63119 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DESSLER, MICHAEL Name: Address: 7229 NOTTINGHAM AVE. Address: City-St-Zip: ST. LOUIS, MO 63119 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DESSLER, BARBARA Name: Name: 7229 NOTTINGHAM AVE. Address: Address: City-St-Zip: ST. LOUIS, MO 63119 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KLEIN, TIMOTHY Name: Name: Address: 5073 SIRRON COURT Address: DUNWOODY, GA 30338 City-St-Zip: 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: TIMOTHY KLEIN MGRM 04/29/2008