2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# M04000002516

Entity Name: BLUE WATER, LLC

Current Principal Place of Business:

510 AUSTIN STREET
STE. GENEVIEVE, MO 63670

New Principal Place of Business:

Current Mailing Address:

510 AUSTIN STREET
STE. GENEVIEVE, MO 63670

New Mailing Address:

FEI Number: 56-2509884 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LYON, M. CHRISTOPHER
125 S. GADSDEN STREET, 3RD FLOOR
TALLAHASSEE, FL 32301 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:	KLEIN, URBAN	
Address:	510 AUSTIN STREET	
City-St-Zip:	STE. GENEVIEVE, MO 63670	
Title:	MGRM	( ) Delete
Name:	KLEIN, VIRGINIA	
Address:	510 AUSTIN STREET	
City-St-Zip:	STE. GENEVIEVE, MO 63670	
Title:	MGRM	( ) Delete
Name:	KLEIN, JOHN	
Address:	7331 NOTTINGHAM AVE.	
City-St-Zip:	ST. LOUIS, MO 63119	
Title:	MGRM	( ) Delete
Name:	DESSLER, MICHAEL	
Address:	7229 NOTTINGHAM AVE.	
City-St-Zip:	ST. LOUIS, MO 63119	
Title:	MGRM	( ) Delete
Name:	DESSLER, BARBARA	
Address:	7229 NOTTINGHAM AVE.	
City-St-Zip:	ST. LOUIS, MO 63119	
Title:	MGRM	( ) Delete
Name:	KLEIN, TIMOTHY	
Address:	5073 SIRRON COURT	
City-St-Zip:	DUNWOODY, GA 30338	

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:	
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 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 03/25/2009

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