

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000001291

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** BLUE WATER RESTORATIONS LLC

**Current Principal Place of Business:**

1335 MERRYBROOK RD  
COLLEGEVILLE, PA 19426

**New Principal Place of Business:**

1709 HILL ST.  
EDGEWATER, FL 32132

**Current Mailing Address:**

1335 MERRYBROOK RD  
COLLEGEVILLE, PA 19426

**New Mailing Address:**

1709 HILL ST.  
EDGEWATER, FL 32132

**FEI Number:** 20-0962065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HOKANSON, PETER  
1709 HILL ST  
EDGEWATER, FL 32132 US

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

HOKANSON, CHARLES  
1709 HILL ST  
EDGEWATER, FL 32132 US

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: CHARLES HOKANSON

02/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HOKANSON, CHARLES  
Address: 1709 HILL ST  
City-St-Zip: EDGEWATER, FL 32132

Title: MGR  
Name: HOKANSON, PETER  
Address: 1709 HILL ST  
City-St-Zip: EDGEWATER, FL 32132

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: CHARLES HOKANSON

MGR

02/16/2010

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