

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000069915

Entity Name: BLUEWATERBAY LIVING, INC.

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

1661 ALLIGATOR DR  
ALLIGATOR POINT, FL 32346

## **New Principal Place of Business:**

1527 ALLIGATOR DR  
ALLIGATOR POINT, FL 32346

## **Current Mailing Address:**

PO BOX 812  
PANACEA, FL 323460812

## **New Mailing Address:**

1527 ALLIGATOR DR  
ALLIGATOR POINT, FL 32346

FEI Number: 04-3768086

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRETT, THAD  
1661 ALLIGATOR DR  
ALLIGATOR POINT, FL 32346 US

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

BRETT, THAD  
1527 ALLIGATOR DR  
ALLIGATOR POINT, FL 32346 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:

02/09/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PS  
Name: BRETT, DEBBIE  
Address: 1527 ALLIGATOR DR  
City-St-Zip: ALLIGATOR POINT, FL 32346

Title: VT  
Name: BRETT, THAD  
Address: 1527 ALLIGATOR DR  
City-St-Zip: ALLIGATOR POINT, FL 32346

I hereby 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 all other like empowered.

SIGNATURE: DEBBIE BRETT

PRES

02/09/2012

Electronic Signature of Signing Officer or Director

Date