

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000037597

Entity Name: BLUE WATER'S EDGE LLC

Current Principal Place of Business:

676 S BEACH ST
ORMOND BEACH, FL 32174

Current Mailing Address:

P.O. BOX 2934
ORMOND BEACH, FL 32175

FEI Number: 26-2426954

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SICILIAN, MARY K
676 S BEACH ST
ORMOND BEACH, FL 32174 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name SICILIAN, MARY
Address 676 S BEACH ST
City-State-Zip: ORMOND BEACH FL 32174

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY K SICILIAN

MGRM

02/02/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date