## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000113646

LLC

Entity Name: BLUEKEY PROPERTY MANAGEMENT SERVICE AND SALES,

**FILED** May 02, 2016 **Secretary of State** CC7409892104

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

1319 NEW YORK AVENUE LYNN HAVEN, FL 32444

# **Current Mailing Address:**

1319 NEW YORK AVENUE LYNN HAVEN, FL 32444

FEI Number: 46-0921491 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BABER, GEORGE LJR. 1319 NEW YORK AVENUE LYNN HAVEN, FL 32444 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 **MGR** 

Name BABER, GEORGE LJR. Name BABER, KAREN R

Address 1319 NEW YORK AVENUE Address 1319 NEW YORK AVENUE City-State-Zip: LYNN HAVEN FL 32444 City-State-Zip: LYNN HAVEN FL 32444

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: GEORGE L. BABER, JR.

**MANAGER** 

05/02/2016