

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED

05 APR 29 AM 7:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02012005 Chg-LP CR2E003 (10/03)

4. FEI Number **72-1560292** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DOCUMENT # A03000000552

1. Entity Name
EAGLE ENERGY 2003-I PRIVATE LIMITED PARTNERSHIP



Principal Place of Business
**711 HAWKSBILL ISLAND DR
SATELLITE BEACH, FL 32937**

Mailing Address
**711 HAWKSBILL ISLAND DR
SATELLITE BEACH, FL 32937**

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. 2194 HIGHWAY A1A, STE 301		Suite, Apt. #, etc. 2194 HIGHWAY A1A, STE 301	
City & State INDIAN HARBOUR BEACH, FL		City & State INDIAN HARBOUR BEACH, FL	
Zip 32937	Country USA	Zip 32937	Country USA

6. Name and Address of Current Registered Agent

**STILLIE, EDWARD L
711 HAWKSBILL ISLAND DR
SATELLITE BEACH, FL 32937**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$2,000,000.00	10. Amount of Capital Contributions in FLORIDA to date. _____
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # P02000021042	NAME EAGLE ENERGY, INC.	STREET ADDRESS	
STREET ADDRESS 700 HAWKSBILL ISLAND DR.		CITY-ST-ZIP	
CITY-ST-ZIP SATELLITE BEACH, FL 32937			
DOCUMENT #	NAME	STREET ADDRESS	
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CITY-ST-ZIP			

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **Edward L. Stillie** **EDWARD L. STILLIE** **4/22/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE