

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

**FILED**  
**Mar 10, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # A06000000440**

1. Entity Name  
**EAGLE ENERGY DEVELOPMENT 2006-I LIMITED PARTNERSHIP**



Principal Place of Business  
**2194 HIGHWAY A-1-A, SUITE 301  
INDIAN HARBOUR BEACH, FL 32937**

Mailing Address  
**2194 HIGHWAY A-1-A, SUITE 301  
INDIAN HARBOUR BEACH, FL 32937**



02102008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**84-1705150**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**5. Name and Address of Current Registered Agent**

**STILLIE, EDWARD L  
EAGLE ENERGY, INC  
2194 HIGHWAY A-1-A, SUITE 301  
INDIAN HARBOUR BEACH, FL 32937**

**DO NOT WRITE  
IN THIS SPACE**

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

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

DATE

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2008, Fee will be \$900.00**

**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**

DOCUMENT # **P02000021042**  
NAME **EAGLE ENERGY, INC.**  
STREET ADDRESS **2194 HIGHWAY A-1-A, SUITE 301**  
CITY-ST-ZIP **INDIAN HARBOUR BEACH, FL 32937**

DOCUMENT #  
NAME **\*\*\*SEE AMENDMENT FILED 8/8/06 FOR**  
STREET ADDRESS **ADDITIONAL GENERAL PARTNERS\*\*\***  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000854297  
03/27/08-80002-008 500.00

**DO NOT WRITE  
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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**

**03/05/08**

**321.777-2345**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE