


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # F00000006407 1. Entity Name DOUBLE EAGLE REALTY, INC.	
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Principal Place of Business 1980 N. ATLANTIC AVE SUITE 116 COCOA BEACH, FL 32931	Mailing Address PO BOX 320271 COCOA BEACH, FL 32932-0271
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DO NOT WRITE IN THIS SPACE



04252007 No Chg-P CR2E034 (11/05)

4. FEI Number 22-2440755	Applied For Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MCNAMARA, MICHAEL F P 257 BAHAMA BLVD. COCOA BEACH, FL 32931
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCNAMARA, MICHAEL F 257 BAHAMA BLVD COCOA BEACH, FL 32931
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05/16/07-80066-010 158.75

**DO NOT WRITE
IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Michael F. McNamara</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: <i>APR 25 2007</i> <small>Date</small>	Daytime Phone #: <i>321 406-0513</i> <small>Daytime Phone #</small>
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MICHAEL F. MCNAMARA