



**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000000883 1. Entity Name EAGLE PROPERTIES, LLC	
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Principal Place of Business 515 SOUTH SIXTH AVENUE WAUCHULA, FL 33873	Mailing Address PO BOX 728 WAUCHULA, FL 33873
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DO NOT WRITE IN THIS SPACE


01052004No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3621736	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**GRIMSLEY, CHARLES M
133 LAKE JUNE RD NW
LAKE PLACID, FL 33852**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GRIMSLEY, CHARLES M PO BOX 728 WAUCHULA, FL 33873
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GRIMSLEY, DENISE P PO BOX 728 WAUCHULA, FL 33873
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02/09/04-80099-021 50.00**

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Charles M. Grimsley **1/5/04** **863-773-3135**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #