

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000006975

1. Entity Name
EAGLE INVESTMENTS, L.C.



Principal Place of Business
6933 HAVANA HIGHWAY
HAVANA, FL 32333

Mailing Address
P.O. BOX 501
HAVANA, FL 32333

FILED
2004 JUL 28 PM 4:29
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



07282004 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number
59-3652095

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHOWERS, JEROME SR.
6933 HAVANA HIGHWAY
HAVANA, FL 32333

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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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SHOWERS, JEROME SR
6933 HAVANA HIGHWAY
HAVANA, FL 32333

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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07/29/04--01003--005 **50.00

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IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #