


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000012670</b> 1. Entity Name <b>EAGLE'S LANDING AT REMINGTON, LC</b>	
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Principal Place of Business <b>1053 MAITLAND CENTER COMMONS BLVD. SUITE 200 MAITLAND, FL 32751</b>	Mailing Address <b>1053 MAITLAND CENTER COMMONS BLVD. SUITE 200 MAITLAND, FL 32751</b>
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**DO NOT WRITE IN THIS SPACE**



04272004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number <b>59-3736779</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**WALKER, BERRY J JR ESQ  
WALKER & TUDHOPE, P.A.  
1053 MAITLAND CENTER COMMONS BLVD.  
MAITLAND, FL 32751**

**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 \_\_\_\_\_

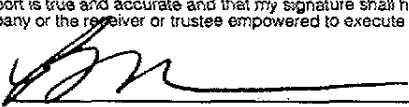
**Filing Fee is \$50.00  
Due by May 1, 2004**

U000000144796  
04/30/04-80145-005 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGR BHAVSAR, I.C. 6167 HARBOURTOWN CT. ORLANDO, FL 32819</b>
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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:**  **APR 28 2004**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_