

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90103 046 \*\*\*\*50.00

DOCUMENT # L03000013014

1. Entity Name

ALPINE EAGLE, LLC



Principal Place of Business

1648 TAYLOR ROAD #427  
PORT ORANGE FL 32128

Mailing Address

1648 TAYLOR ROAD #427  
PORT ORANGE FL 32128

2. Principal Place of Business

3288 Spruce Creek Glen  
Suite, Apt. #, etc.

3. Mailing Address

Same as above  
Suite, Apt. #, etc.



1st MOORE

CR2E083 (10/04)

City & State

Daytona Beach, FL

City & State

Daytona Beach, FL

4. FEI Number

20-0023094

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DEAN MEAD SERVICES, LLC  
800 NORTH MAGNOLIA, SUITE 1500  
ORLANDO FL 32803

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete  
NAME MERCER, GERALD G  
STREET ADDRESS 1648 TAYLOR ROAD #427  
CITY-ST-ZIP PORT ORANGE FL 32128

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE Gerald G. Mercer and Cindy K. Mercer, ☒ Change ☐ Addition  
NAME as tenants by the entirety, member  
STREET ADDRESS 3288 Spruce Creek Glen  
CITY-ST-ZIP Daytona Beach, FL 32128

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

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: Gerald G. Mercer, member 3/1/05 386-763-5484  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #