2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018304

Entity Name: EAGLE BUSINESS SOLUTIONS, LLC

Apr 23, 2008 Secretary of State

19321 US HWY 19 N SUITE 404

CLEARWATER, FL 33764 US

New Mailing Address: Current Mailing Address:

PO BOX 15158

CLEARWATER, FL 33766 US

FEI Number: 37-1467051 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EGERTER, CHARLES M PRES 19321 US HWY 19 N SUITE 404 CLEARWATER, FL 33764 US

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.

SIGNATURE:

Date

Title:

Name:

Address:

Address:

City-St-Zip:

City-St-Zip:

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

562 LEWIS BLVD SE

EGERTER, CHARLES M PRES

ST. PETERSBURG, FL 33705 US

(X) Change () Addition

MANAGING MEMBERS/MANAGERS:

MGRM () Delete EGERTER, CHARLES M PRES Name:

Address: PO BOX 15158

City-St-Zip: CLEARWATER, FL 33766 US

Title: MGRM () Delete Title: () Change () Addition Name:

Name: MUTHUSWAMY, HARI CTO Address: 2230 SPRING HARBOR DRIVE, APT C City-St-Zip: DELRAY BEACH, FL 33445 US

Title: () Delete Title: MGRM () Change (X) Addition

Name: WOOD, RICHARD L COO Name: Address: Address: PO BOX 15158

City-St-Zip: City-St-Zip: CLEARWATER, FL 33766

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 EGERTER **PRES** 04/23/2008