

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000057501

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: EAGLE ACCOUNTING & TAXES, LLC

## Current Principal Place of Business:

320 W OAK TERRACE  
LEESBURG, FL 34748 US

## New Principal Place of Business:

810 N NEW HAMPSHIRE AVE  
TAVARES, FL 32778 US

## Current Mailing Address:

P.O. BOX 1114  
TAVARES, FL 32778 US

## New Mailing Address:

FEI Number: 20-0535587      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STOFFEL, RENEE B  
810 N. NEW HAMPSHIRE AVE.  
TAVARES, FL 32778 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: STOFFEL, RENEE B  
Address: 810 N. NEW HAMPSHIRE AVE  
City-St-Zip: TAVARES, FL 32778

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: PUENTE, DAVID M  
Address: 810 N NEW HAMPSHIRE AVE  
City-St-Zip: TAVARES, FL 32778

Title: MGRM ( ) Change (X) Addition  
Name: BISHOP, FRANKLIN C  
Address: 126 SHADOW WOODS LN S  
City-St-Zip: EUSTIS, FL 32726

Title: MGRM ( ) Change (X) Addition  
Name: BILDSTEIN, ROBERT  
Address: 716 DEL ROSARIO ST  
City-St-Zip: LADY LAKE, FL 32159

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: RENEE STOFFEL

MGRM

04/28/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date