

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 07, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000016531

1. Entity Name
EAGLE 01 HOLDINGS, LLC



Principal Place of Business
**1006 WASHINGTON STREET
TALLAHASSEE, FL 32312**

Mailing Address
**1006 WASHINGTON STREET
TALLAHASSEE, FL 32312**



07052006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
80-0099713

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MOYLE, JON C JR.
118 NORTH GADSDEN STREET
TALLAHASSEE, FL 32301**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restate)

DATE _____

**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
EAGLE 01 MANAGEMENT, INC.
1006 WASHINGTON STREET
TALLAHASSEE, FL 32312**

TITLE
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CITY-ST-ZIP

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000000568401
07/07/06-80007-008 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 exemptions contained in Chapter 119, 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 #