


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 31, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000021422 1. Entity Name EAGLE PUTT GREENS, L.L.C.	
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Principal Place of Business 2905 NICHOLAS LANE APOPKA, FL 32703	Mailing Address 2905 NICHOLAS LANE APOPKA, FL 32703
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DO NOT WRITE IN THIS SPACE



07262006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1325032	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent COMERER, ROBERT N 2905 NICHOLAS LANE APOPKA, FL 32703

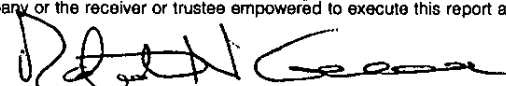
DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>	DATE _____
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Filing Fee is \$50.00 Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COMERER, ROBERT N 2905 NICHOLAS LANE APOPKA, FL 32703
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<p>U00000572888 08/01/06-80003-025 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	7-27-06 407-682-2243 <small>Date Daytime Phone #</small>
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