


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000037454 1. Entity Name EAGLE IRONWORKS, LLC	
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Principal Place of Business 1618 WHITE LAKE DRIVE INVERNESS, FL 34453	Mailing Address 1618 WHITE LAKE DRIVE INVERNESS, FL 34453
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DO NOT WRITE IN THIS SPACE



01052006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 83-0399907	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent REYNOLDS, WILLIAM 1618 WHITE LAKE DRIVE INVERNESS, FL 34453

**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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.


**Filing Fee is \$50.00
Due by May 1, 2006**

000000445084
03/07/06-80028-014 55.00

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS REYNOLDS, WILLIAM J 1618 WHITE LAKE DRIVE INVERNESS, FL 34453
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEE, VIOLA 1618 WHITE LAKE DRIVE INVERNESS, FL 34453
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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:  **2/20/06** **352-341-8915**
SIGNATURE AND TYPED OR PRINTED NAME OF SERVING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #