2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000057271

1. Entity Name

EAGLE PLAZA SHOPPING CENTER, L.C.



FILED Jan 11, 2008 08:00 All Secretary of State

Principal Place of Business

7150 HWY 1 MANSURA, LA 71350 Mailing Address

632 MINDY WAY SAN JOSE, CA 95123



DO NOT WRITE IN THIS SPACE

01072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number		Applied For
68-0594336	[Not Applicable
5. Certificate of Status Desired	\$5.0	Additional

6. Name and Address of Current Registered Agent

WILSON, DAVID A ESQ. 1409 N.E. 22ND AVENUE OCALA, FL 34470 DO NOT WRITE IN THIS SPACE

			NACH BERKER OF A COMMON GRAPH		
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 reinstating)	DATE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75					
9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGRM				
NAME	SMITH, DAVID W				
STREET ADORESS	632 MINDY WAY				
CITY-ST-ZIP	SAN JOSE, CA 95123				
TITLE		linner	1790591		
NAME		การสังก็ตั้ง	1780591 -80028-023 138:75		
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TITLE		IN THIS S	DACE		
NAME.					
STREET ADDRESS					
CITY-ST-ZIP					

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: Tolum

TILE

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

URE AND JYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/8/08 408 226 1238

Daytime Phone #