

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027262

FILED
Apr 25, 2008
Secretary of State

Entity Name: EAGLE POINTE, LLC

Current Principal Place of Business:

840 EDGEWOOD AVENUE SOUTH
SUITE 220
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

1650-302 MARGARET STREET
PMB 382
JACKSONVILLE, FL 32204

New Mailing Address:

FEI Number: 20-2545353 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRAZIER, CLARENCE F
1548 LANCASTER TERRACE
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

FRAZIER, CLARENCE F
840 EDGEWOOD AVENUE SOUTH
SUITE 220
JACKSONVILLE, FL 32205 US

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

04/25/2008

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SUTER, MAX M
Address: 840 EDGEWOOD AVENUE SOUTH, SUITE 220
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SUTER, MAX M
Address: 840 EDGEWOOD AVENUE SOUTH, STE 220
City-St-Zip: JACKSONVILLE, FL 32205

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: MAX SUTER

MGRM

04/25/2008

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