

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Feb 01, 2007 08:00 AM  
Secretary of State**

**DOCUMENT # L05000058925**

1. Entity Name  
EAC, LLC



Principal Place of Business  
11131 NE 101 TERRACE  
ARCHER, FL 32618 US

Mailing Address  
11131 NE 101 TERRACE  
ARCHER, FL 32618 US



01112007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-3007568

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SHARON C BRANNAN CPA PA  
161 N MAIN STREET  
WILLISTON, FL 32696

**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 reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	CAVERLY, EDWARD A
STREET ADDRESS	11131 NE 101 TERRACE
CITY-ST-ZIP	ARCHER, FL 32618

TITLE	
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U000000617084  
02/07/07-80058-016 50.00

**DO NOT WRITE  
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:** Edward Caverly  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1-27-2007 352-486-86