

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000005779

FILED  
Jan 28, 2007  
Secretary of State

Entity Name: EAGLESWING, LLC

**Current Principal Place of Business:**

21364 NW CR2054  
ALACHUA, FL 32615

**New Principal Place of Business:**

**Current Mailing Address:**

21364 NW CR2054  
ALACHUA, FL 32615

**New Mailing Address:**

FEI Number: 20-4108898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WOOLFE, ROBERT C  
500 E. UNIVERSITY AVENUE  
GAINESVILLE, FL 32601 US

**Name and Address of New Registered Agent:**

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

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WOOLFE, R.C.  
Address: 21364 NW CR2054  
City-St-Zip: ALACHUA, FL 32615

Title: MGRM ( ) Delete  
Name: WOOLFE, D.R.  
Address: 21364 NW CR2054  
City-St-Zip: ALACHUA, FL 32615

Title: MGRM ( ) Delete  
Name: WOOLFE, M.C.  
Address: 660 ST. JOHNS COURT  
City-St-Zip: WINTER PARK, FL 32792

Title: MGRM ( ) Delete  
Name: KRAJIC, J.L.  
Address: 830 N. VILLAGE LAKE DRIVE  
City-St-Zip: DELAND, FL 32724

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: R.C. WOOLFE

MGMR

01/28/2007

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