

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000054740

**FILED**  
**Jan 12, 2009**  
**Secretary of State**

**Entity Name:** DOUBLE EAGLE FACILITIES MAINTENANCE AND CONSTRUCTION, LLC

**Current Principal Place of Business:**

1013 WINCHESTER LANE  
VANRICO, FL 33594

**New Principal Place of Business:**

1420 RUM STILL CIRCLE  
NICEVILLE, FL 32578

**Current Mailing Address:**

1013 WINCHESTER LANE  
VANRICO, FL 33594

**New Mailing Address:**

PO BOX 186  
VALRICO, FL 33595

**FEI Number:** 20-4934070

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCKENNEY, WAYNE  
1013 WINCHESTER LANE  
VANRICO, FL 33594 US

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

MCKENNEY, WAYNE  
1420 RUM STILL CIRCLE  
NICEVILLE, FL 33595 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:

01/12/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MCKENNEY, WAYNE  
Address: 1013 WINCHESTER LANE  
City-St-Zip: VANRICO, FL 33594

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MCKENNEY, WAYNE  
Address: PO BOX 186  
City-St-Zip: VALRICO, FL 33595

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: AMANDA JONES

BDA

01/12/2009

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