

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051909

FILED  
Jul 17, 2008  
Secretary of State

**Entity Name:** SOARING EAGLE ENTERPRISES, LLC

**Current Principal Place of Business:**

3235 GARDENT STREET, SUITE B-145  
TITUSVILLE, FL 32796

**New Principal Place of Business:**

417 S. PALM AVENUE  
TITUSVILLE, FL 32796

**Current Mailing Address:**

3235 GARDENT STREET, SUITE B-145  
TITUSVILLE, FL 32796

**New Mailing Address:**

417 S. PALM AVENUE  
TITUSVILLE, FL 32796

FEI Number: 22-3964374      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: HOWARD, JAN M  
Address: 3235 GARDENT STREET, SUITE B-145  
City-St-Zip: TITUSVILLE, FL 32796

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: HOWARD, JAN M  
Address: 3235 GARDEN STREET, SUITE B-145  
City-St-Zip: TITUSVILLE, FL 32796

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: JAN M. HOWARD

MGR

07/17/2008

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