

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000068490

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** EAGLE FASTENER & SUPPLY, LLC

**Current Principal Place of Business:**

248 HATTERAS AVENUE  
CLERMONT, FL 34711

**New Principal Place of Business:**

104 CHALLENGER CT.  
SANFORD, FL 32771

**Current Mailing Address:**

248 HATTERAS AVENUE  
CLERMONT, FL 34711

**New Mailing Address:**

104 CHALLENGER CT.  
SANFORD, FL 32771

**FEI Number:** 26-0446073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VON, PLOURDE A  
148 MARITIME DRIVE  
SANFORD, FL 32771 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  
Name: PLOURDE, VON A PRES  
Address: 148 MARITIME DRIVE  
City-St-Zip: SANFORD, FL 32771

Title: MGRM  
Name: MORRISON, MARTY VP  
Address: 10922 VISTA DEL SOL CIRCLE  
City-St-Zip: CLERMONT, FL 34711

I hereby 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: MARTY MORRISON

VP

02/18/2011

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