2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 04, 2009
Secretary of State

DOCUMENT# L08000083902

Entity Name: DOUBLE EAGLE, LLC

Current Principal Place of Business:

192 TURTLE CREEK DRIVE
TEQUESTA, FL 33469

New Principal Place of Business:

43 PRINCEWOOD LANE
PALM BEACH GRDENS, FL 33410

Current Mailing Address:

192 TURTLE CREEK DRIVE
TEQUESTA, FL 33469

New Mailing Address:

43 PRINCEWOOD LANE
PALM BEACH GRDENS, FL 33410

FEI Number: 80-0249639 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLAR, M. KATHRYN
192 TURTLE CREEK DRIVE
TEQUESTA, FL 33469 US

Name and Address of New Registered Agent:

KLAR, M. KATHRYN
43 PRINCEWOOD LANE
PALM BEACH GARDENS, FL 33410 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: 03/04/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: KLAR, M. KATHRYN
Address: 192 TURTLE CREEK DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: KLAR, M. KATHRYN
Address: 43 PRINCEWOOD LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM ( ) Change (X) Addition
Name: KLAR, JOHN R
Address: 43 PRINCEWOOD LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: JOHN R. KLAR MGRM 03/04/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date