

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000003913

Entity Name: EAGLES APARTMENTS, LLC

**FILED**  
**Mar 31, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6445 POWERS FERRY ROAD, SUITE 205  
ATLANTA, GA 30339

**New Principal Place of Business:**

**Current Mailing Address:**

6445 POWERS FERRY ROAD, SUITE 205  
ATLANTA, GA 30339

**New Mailing Address:**

6300 POWERS FERRY ROAD, SUITE 600-298  
ATLANTA, GA 30339

FEI Number: 27-3325046

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LINZNER, BETH E ESQ.  
2295 NW CORPORATE BLVD., SUITE 235  
BOCA RATON, FL 33431 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: MGR  
Name: EAGLES POINTE MANAGER, LLC  
Address: 6445 POWERS FERRY ROAD, SUITE 205  
City-St-Zip: ATLANTA, GA 30339

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: EAGLES POINTE MANAGER, LLC

MGR

03/31/2012

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