

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90234 034 ****70.00

DOCUMENT # N03000003242

1. Entity Name

LIL EAGLE'S NEST, INC.



Principal Place of Business

1181 NW 30TH AVENUE
FORT LAUDERDALE FL 33311

Mailing Address

P O BOX 16293
FORT LAUDERDALE FL 33318

2. Principal Place of Business

2070 N.W. 29th Terr.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

Fort Lauderdale, FL

City & State

4. FEI Number

06-1680509

Applied For

Not Applicable

Zip

33311

Country

Broward

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLAIR, MISHEL
1181 NW 30TH AVENUE
FORT LAUDERDALE FL 33311

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	CLAIR, MISHEL	
STREET ADDRESS	1181 NW 30TH AVENUE	
CITY - ST - ZIP	FORT LAUDERDALE FL 33311	
TITLE	DV	<input type="checkbox"/> Delete
NAME	CLAIR, MARY	
STREET ADDRESS	1181 NW 30TH AVENUE	
CITY - ST - ZIP	FORT LAUDERDALE FL 33311	
TITLE	D	<input type="checkbox"/> Delete
NAME	KING, KAREN	
STREET ADDRESS	5443 GATE LAKE ROAD	
CITY - ST - ZIP	TAMARAC FL 33311	
TITLE	DT	<input type="checkbox"/> Delete
NAME	WRIGHT, WILLIE	
STREET ADDRESS	1640 NW 27TH AVENUE	
CITY - ST - ZIP	FORT LAUDERDALE FL 33311	
TITLE	DP	<input type="checkbox"/> Delete
NAME	CLAIR, MISHEL	
STREET ADDRESS	2070 NW 29TH TERR	
CITY - ST - ZIP	FORT LAUDERDALE FL 33311	
TITLE	DV	<input type="checkbox"/> Delete
NAME	CLAIR, MARY	
STREET ADDRESS	2070 NW 29TH TERR	
CITY - ST - ZIP	FORT LAUDERDALE FL 33311	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
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STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mishel Clair* *Mishel Clair* *May 2, 2006 (954) 735-5985*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #