

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000116271

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: DOUBLE EAGLE PROPERTIES, INC.

## Current Principal Place of Business:

17009 MAGNOLIA ISLAND BLVD  
CLERMONT, FL 34711

## New Principal Place of Business:

## Current Mailing Address:

17009 MAGNOLIA ISLAND BLVD  
CLERMONT, FL 34711

## New Mailing Address:

FEI Number: 59-3688533

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREER, LESLIE D  
17009 MAGNOLIA ISLAND BLVD  
CLERMONT, FL 34711 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GREER, LESLIE D  
Address: 17009 MAGNOLIA ISLAND BLVD  
City-St-Zip: CLERMONT, FL 34711

Title: DV ( ) Delete  
Name: ROBERTS, STEPHEN P  
Address: 13649 GRANVILLE  
City-St-Zip: CLERMONT, FL 34711

Title: DS ( ) Delete  
Name: ROBERTS, RICK  
Address: 13649 GRANVILLE  
City-St-Zip: CLERMONT, FL 34711

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV (X) Change ( ) Addition  
Name: ROBERTS, STEPHEN P  
Address: 1600 2ND STREET  
City-St-Zip: CLERMONT, FL 34711

Title: DS (X) Change ( ) Addition  
Name: ROBERTS, RICK  
Address: 12633 LAKE RIDGE CIRCLE  
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE D. GREER

PRES

01/05/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date