


2006 FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000085150

1. Entity Name
EAGLE LAND MANAGER - FLORIDA, INC.



Principal Place of Business 2002 N. FRONTAGE RD. PLANT CITY, FL 33563	Mailing Address 2002 N. FRONTAGE RD. PLANT CITY, FL 33563
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DO NOT WRITE IN THIS SPACE



07052006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1185786	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CHIDESTER, DAVE
 2002 N. FRONTAGE RD.
 PLANT CITY, FL 33563**

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00
 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

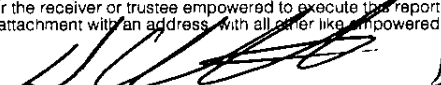
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEARD, WILLIAM T 200 BROOKSTONE CTR PKWY SUITE 205 COLUMBUS, GA 31904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FELDNER, RONALD A 200 BROOKSTONE CTR PKWY SUITE 205 COLUMBUS, GA 31904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD YOUNG, RICHARD M 200 BROOKSTONE CTR PKWY SUITE 205 COLUMBUS, GA 31904
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100000568421
 07/07/06-80008-003 550.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 the report as required by Chapter 607, 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:  **DAVID CHIDESTER** **7-6-06** **813 359 5407**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #