2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P99000051140

Entity Name: EAGLE MOON PRODUCTIONS, INC.

Current Principal Place of Business:

3134 CRANE'S COVE
KISSIMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

3134 CRANE'S COVE
KISSIMEE, FL 34741

New Mailing Address:

FEI Number: 59-7156003 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EHMCKE, MICHAEL C
3134 CRANE'S COVE
KISSIMMEE, FL 34741 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: D ( ) Delete
Name: EHMCKE, MICHAEL C
Address: 3134 CRANE'S COVE
City-St-Zip: KISSIMEE, FL 34741

Title: D ( ) Delete
Name: EHMCKE, BENJAMIN
Address: 1331 DIALS PLANTAION DR.
City-St-Zip: STATHAM, GA 30666

Title: D ( ) Delete
Name: EHMCKE, MALISSA
Address: 3134 CRANE'S COVE
City-St-Zip: KISSIMMEE, FL 34741

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: O ( ) Change (X) Addition
Name: EHMCKE, RICHARD
Address: 1331 DIALS PLANTATION DR
City-St-Zip: STATHAM, GA 30666

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 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: BENJAMIN EHMCKE D 03/24/2009

Electronic Signature of Signing Officer or Director Date