


2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F06000000751		
1. Entity Name EAGLE GROOVING, INC.		
Principal Place of Business 750 HURRICANE SHOALS RD NE LAWRENCEVILLE, GA 30043	Mailing Address 750 HURRICANE SHOALS RD NE LAWRENCEVILLE, GA 30043	

FILED
Sep 02, 2008 08:00 AM
Secretary of State



08272008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-1856902	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

BLOODWORTH, THOMAS W MR.
14410 PALMWOOD RD.
B-28
PALM BEACH GARDENS, FL 33410

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 \$150.00
Due by September 12, 2008

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MR. BLOODWORTH, T. WAYNE 750 HURRICANE SHOALS RD NE LAWRENCEVILLE, GA 30043
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09/02/08-80001-022 150.00

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 authorized to execute this 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: Wayne Bloodworth, Pres. 8/28/08 (770)271-0566
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #