

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Oct 15 1998 8:00am⁵
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N43725 (3)
1. Corporation Name

SEBRING EAGLES, INC.

Principal Place of Business	Mailing Address
P.O. BOX 1944 SEBRING FL 33871-1944	P.O. BOX 1944 SEBRING FL 33871-1944

2. Principal Place of Business	2a. Mailing Address
21 12921 US 98 S	26 12921 US 98 S
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Sebring FL	28 City & State Sebring FL
24 33871	29 33871
25 Highlands	30 Highlands

3. Date Incorporated or Qualified	06/04/1991		
4. FEI Number	59-3001227	Applied For	Not Applicable
5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution	☐	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association?	☐ Yes ☐ No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☐ No		

9. Name and Address of Current Registered Agent	81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
PETERSON, JOHN 11501 US 27 S #1 SEBRING FL 33872	Richard Murray	11501 US 27 S #10		Sebring FL	33870

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 617.0503, Florida Statutes.

SIGNATURE Richard Murray Richard Murray 10-10-98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	PETERSON, JOHN	1.2 NAME	Ray Howard
STREET ADDRESS	11501 US 27 S #1	1.3 STREET ADDRESS	10809 US 27 S
CITY-ST-ZIP	SEBRING FL	1.4 CITY-ST-ZIP	Sebring FL 33870
TITLE	TS	2.1 TITLE	TS
NAME	MURRAY, LARRY	2.2 NAME	Dave Kuhns
STREET ADDRESS	7910 CASH ST	2.3 STREET ADDRESS	12921 US 98
CITY-ST-ZIP	SEBRING FL	2.4 CITY-ST-ZIP	Sebring FL 33871
TITLE	V	3.1 TITLE	
NAME	PETREE, ROBERT	3.2 NAME	
STREET ADDRESS	13012 US 98	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEBRING FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	
NAME	MOUREY, RICHARD	4.2 NAME	
STREET ADDRESS	11501 US 27 S #5	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEBRING FL	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	T
NAME	ALBERS, DENNIS	5.2 NAME	Leon Fisher
STREET ADDRESS	1613 WILLOW RUN	5.3 STREET ADDRESS	11501 US 27 S #12
CITY-ST-ZIP	SEBRING FL	5.4 CITY-ST-ZIP	Sebring FL 33870
TITLE		6.1 TITLE	T
NAME		6.2 NAME	Igy Solar
STREET ADDRESS		6.3 STREET ADDRESS	2509 Oak Beach Blvd
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Sebring FL 33870

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard Murray Trustee 9-18-98 (941) 665-4685
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (5/98)