2004 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P00000106265 EAGLE CREEK DEVELOPMENT CORPORATION



Apr 23, 2004 8:00 am Secretary of State 04-23-2004 90256 040 ***150 00 Principal Place of Business Mailing Address 370 CENTER POINTE CIRCLE, STE. 1136 370 CENTER POINTE CIRCLE, STE. 1136 24052993 ALTAMONTE SPRINGS, FL 32701 ALTAMONTE SPRINGS, FL 32701 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04022004 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For 59-3680160 Not Applicable Zin Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PASQUALETTI, JOSEPH P Street Address (P.O. Box Number is Not Acceptable) 370 CENTER POINTE CIRCLE, STE, 1136 ALTAMONTE SPRINGS, FL 32701 City Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11, TITLE ☐ Delete TITLE ASQUALETTI, JOSEPH P NAME NAME SEE ATTACHED SHEET STREET ADDRESS 370 CENTER POINTE CIRCLE, STE. 1136 STREET ADDRESS CHTY-ST-ZIP ALTAMONTE SPRINGS, FL 32701 CITY-ST-ZIP D TITLE ☐ Delete ☐ Change ☐ Addition JONES, PETER E NAME NAME 370 CENTER POINTE CIRCLE, STE. 1136 STREET ADDRESS STREET ADDRESS ALTAMONTE SPRINGS, FL 32701 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE PASQUALETTI, JOSEPH P NAME NAME 370 CENTER POINTE CIRCLE SUITE 1176 STREET ADDRESS STREET ADDRESS ALTAMONTE SPRINGS, FL 32701 CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITL F NAME NAME SEE ATTACHED SHEET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4078349560

FILED

Affachment 24052993

DOCUMENT # P00000106265

EAGLE CREEK DEVELOPMENT CORPORATION

BOX 11. ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS

☑ Change

D/P/S/T Pasqualetti, Joseph P 370 Center Pointe Circle, Suite 1136 Altamonte Springs, FL 32701

☑ Addition

D / V Kynaston, Neil 370 Center Pointe Circle, Suite 1136 Altamonte Springs, FL 32701