

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025320

FILED
Apr 21, 2006
Secretary of State

Entity Name: EAGLES TRAIL APARTMENTS, INC.

Current Principal Place of Business:

1485 RIVIERA DRIVE
KISSIMMEE, FL 34744

New Principal Place of Business:

1637 EAST VINE STREET
SUITE E
KISSIMMEE, FL 34744

Current Mailing Address:

1485 RIVIERA DRIVE
KISSIMMEE, FL 34744

New Mailing Address:

1637 EAST VINE STREET
SUITE E
KISSIMMEE, FL 34744

FEI Number: 20-2390543

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BASQUE, JAMES F
SHUFFIELD, LOWMAN & WILSON, P.A.
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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: () Delete
Name:
Address:
City-St-Zip:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Change (X) Addition
Name: DIXON, KENNETH G
Address: 1637 E VINE STREET, SUITE E
City-St-Zip: KISSIMMEE, FL 34744

Title: V () Change (X) Addition
Name: LOWERY, DEION
Address: 1637 E VINE STREET, SUITE E
City-St-Zip: KISSIMMEE, FL 34744

Title: S () Change (X) Addition
Name: BADGER, EMILY
Address: 1637 E VINE STREET, SUITE E
City-St-Zip: KISSIMMEE, FL 34744

I hereby certify that the information supplied with this filing does not qualify for the 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: KENNETH DIXON

P

04/21/2006

Electronic Signature of Signing Officer or Director

_____ Date