

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000053507

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: EAGLE DEBT SETTLEMENT, INC.

## Current Principal Place of Business:

5100 S. CLEVELAND AVE  
SUITE 318 BOX 339  
FORT MYERS, FL 33905 US

## New Principal Place of Business:

## Current Mailing Address:

5100 S. CLEVELAND AVE  
SUITE 318 BOX 339  
FORT MYERS, FL 33905 US

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST  
SUITE 500  
ORLANDO, FL 32804 US

## Name and Address of New Registered Agent:

FLORIDA BUSINESS FORMATION, INC.  
20 S. BROAD STREET  
BROOKSVILLE, FL 34601 US

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: JOHN DUNBAR

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: AMMON, EDWARD  
Address: 5551 LUCKETT ROAD B-23  
City-St-Zip: FORT MYERS, FL 33905 US

Title: VD ( ) Delete  
Name: WILLIAMS, LINDA  
Address: 10216 ARROWHEAD COURT  
City-St-Zip: INDIANAPOLIS, IN 46234 US

Title: PD ( ) Delete  
Name: AMMON, LINDA  
Address: 5551 LUCKETT ROAD B-23  
City-St-Zip: FORT MYERS, FL 33905 US

## 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:

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: LINDA AMMON

PD

04/23/2008

Electronic Signature of Signing Officer or Director

Date