2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000021803

t. Entity Name EAGLE WATCH PROPERTIES, INC.

Principal Place of Business

4200 GULF SHORE BLVD NORTH NAPLES, FL 34103

Mailing Address

4200 GULF SHORE BLVD NORTH NAPLES, FL 34103

FILED Apr 24, 2006 08:00 AM Secretary of State



03232006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0741350

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

CATALANO, ANTHONY J 4001 TAMIAMI TRAIL NORTH STE 250 NAPLES, FL 34103

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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 Squature, typed or printed name of registored agent and title if applicable. (NOTE: Pragational Agent signature required when reinstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCOTT F LUTGERT 4200 GULFSHORE BLVD N NAPLES, FL 34103				000000530243 05/05/06-80109-002 150.00
TISLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD RICHARD J BAKER 4200 GULFSHORE BLVD N NAPLES, FL 34103 VTAS	. <u>-</u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOWARD B GUTMAN 4200 GULFSHORE BLVD N NAPLES, FL 34103	- - -		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP				IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-			
TITLE NAME STREET ADDRESS	1111				

It is filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information is five and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director ownered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if with all other like empowered. I hereby certify that the information indicated on this report or supplier of the corporation or the receiver or changed, or on an alty Howard B. Gutman

SIGNATURE

CITY-ST-ZIP

STENATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(239) 261-6100

Daytime Phone #