

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 15, 2000 8:00 am**  
**Secretary of State**

03-15-2000 90068 024 \*\*\*158.75

**DOCUMENT # P99000028057**

1. Entity Name  
**EATON HOLDINGS LIMITED, INC.**

Principal Place of Business      Mailing Address  
**3300 N UNIVERSITY DR #604**      **3300 N UNIVERSITY DR #604**  
**CORAL SPRINGS FL 33065**      **CORAL SPRINGS FL 33065-4132**

2. Principal Place of Business      3. Mailing Address  
**3300 N. Universtiy Drive**      **1008 Madison 9445**

Suite, Apt. #, etc.  
**Suite 604**

City & State      City & State  
**Coral Springs Florida**      **Annapolis Missouri**

Zip      Country      Zip      Country  
**33065 Broward**      **63620 Madison**

4. FEI Number      Applied For  
**65-0915328**       Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

**NICHOLLS, GREGG E**  
**3300 N UNIVERSITY DR #604**  
**CORAL SPRINGS FL 33065**

**7. Name and Address of New Registered Agent**

Name **Guy Stewart Attorney at Law**  
 Street Address (P.O. Box Number is Not Acceptable)  
**536 Malaga Avenue**  
 City **Coral Gables**      **FL**      Zip Code **33134**

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.  
 SIGNATURE *Maria Marie Eaton*      **Maria Marie Eaton**      **March 10, 2000**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

|  |  |                                 |
|--|--|---------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D Director</b><br><b>EATON, MARIA</b><br><b>3300 N UNIVERSITY DR #604</b><br><b>CORAL SPRINGS FL 33065</b>                    | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Director (addition)</b><br><b>Russell V. Combs</b><br><b>50 West Main Street</b><br><b>Friendship New York, 14739</b>         | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Director (addition)</b><br><b>George Williams</b><br><b>2425 Ridgecrest Dr SE</b><br><b>Albuquerque New Mexico, 87108</b>     | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Treasure (addition)</b><br><b>Maria Marie Eaton</b><br><b>1008 Madison 9445</b><br><b>Annapolis Mo. 63620</b>                 | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Secretary (addition)</b><br><b>Sandra T. Greer</b><br><b>3011 Brookdale Drive</b><br><b>Kingwood Texas 77339</b>              | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>CORPORATE LEGAL COUNCEL (addition)</b><br><b>Guy Stewart</b><br><b>536 Malaga Avenue</b><br><b>Coral Gables Florida 33134</b> | <input type="checkbox"/> Delete |

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

|  |   |  |
|--|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Russell V. Combs</b><br><b>50 West Main Street</b><br><b>Freindship New York 14739</b><br><b>DIRECTOR</b>        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DIRECTOR</b><br><b>George Williams</b><br><b>2425 Ridgecrest Drive SE</b><br><b>Albuquerque New Mexico 87108</b> | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>CEO</b><br><b>Maria Marie Eaton</b><br><b>1008 Madison 9445</b><br><b>Annapolis Mo. 63620</b>                    | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>President</b><br><b>Russell V. Combs</b><br><b>50 West Main Street</b><br><b>Friendship Newe York 14739</b>      | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>C.O.O.</b><br><b>George Williams</b><br><b>2425 Ridgecrest Drive SE</b><br><b>Albuquerque New Mexico 87108</b>   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Sr. Vice President</b><br><b>Garland D. Greer</b><br><b>3011 Brookdale Drive</b><br><b>Kingwood Texas 77339</b>  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other fees empowered.

SIGNATURE: *Maria Marie Eaton*      **Maria Marie Eaton**      **March 10, 2000**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/99)