## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000019174

Entity Name: EAGLE REALTY WEST COAST, INC.

FILED Aug 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8695 COLLEGE PARKWAY 7401 WILES ROAD

SUITE 425 SUITE 233

FORT MYERS, FL 33919 CORAL SPRINGS, FL 33067

Current Mailing Address: New Mailing Address:

8695 COLLEGE PARKWAY 7401 WILES ROAD

SUITE 425 SUITE 233

FORT MYERS, FL 33919 CORAL SPRINGS, FL 33067

FEI Number: 20-2293065 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILLIAMSON, MARCIA

8695 COLLEGE PARKWAY

SUITE 425

SUITE 425

SUITE 425 SUITE 233

FORT MYERS, FL 33919 US CORAL SPRINGS, FL 33067 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: MARCIA WILLIAMSON 08/11/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

AFFIAFRA AND DIDEATADA

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 ALMEIDA, FELIPE
 Name:
 WILLIAMSON, MARCIA

 Address:
 8695 COLLEGE PARKWAY SUITE 425
 Address:
 7401 WILES ROAD

City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: CORAL SPRINGS, FL 33067

Title: VP ( ) Delete Title: M (X) Change ( ) Addition Name: WILLIAMSON. MARCIA Name: DE OLIVEIRA, NUBIA

 Name:
 WILLIAMSON, MARCIA
 Name:
 DE OLIVEIRA, NUBIA

 Address:
 8695 COLLEGE PARKWAY SUITE 425
 Address:
 7401 WILES ROAD

City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: CORAL SPRINGS, FL 33067

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: MARCIA WILLIAMSON P 08/11/2008