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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **851066** **(1)**

1. Corporation Name

EAGLE WOOD, INC.

Principal Place of Business	Mailing Address
~~1715 ORR INDUSTRIAL CT.~~ 7680 Townsend Pl	~~1715 ORR INDUSTRIAL CT.~~
~~P.O.BOX 560005~~ P.O. Box 1046	~~P.O.BOX 560005~~
~~CHARLOTTE NC 28256-7035~~ Denver NC 28037	~~CHARLOTTE NC 28256-7035~~

3. Date Incorporated or Qualified: 11/18/1981	3a. Date of Last Report: 06/20/1995
4. FEI Number: 59-1124505	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25 LINCOLN	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

NEWTON, C.D.
RT 6 BOX 136
HAROLD FL 32563

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Signature typed or printed name of new registered agent and title, if applicable) (NOTE: Registered Agent Signature required when mailed in) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD EAGLE, JERRY L. 7216 DELTA LAKE DR CHARLOTTE NC	☐ DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	☑ Change ☐ Addition 8118 Mallard Rd. Denver NC 28037	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V EAGLE, R.E. RT 1 BOX 149 COUNTY RD NEWTON AL	☐ DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BROOKS, MILDRED ANN 1025 MANCHESTER LANE CHARLOTTE NC	☑ DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	☐ Change ☑ Addition S Tonya Tucker 6939 Forest Dr. Denver NC 28037	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	☐ Change ☐ Addition	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerry L. Eagle 3-15-96 704-483-5853

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone #