FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

ELORIDA DEPARTMENT DE STATE

FILED

Mar 26 1998 8:00am

Secretary of State

Change

Change

Addition

Addition

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000003080 (9)

THE EAGLE GROUP OF CONNECTICUT, INC.

BEAUDIN, WILLIAM A.

6 POND PLACE

AVON CT

NAME

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Principal Place of Business Mailing Address 110 REED AVENUE 110 REED AVENUE WEST HARTFORD CT 06133-0360 WEST HARTFORD CT 06133-0360 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/06/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 06-0939303 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CATLIN, H. JAMES JR. 1700 ALFRED 1. DUPONT BUILDING 82 Street Address (P.O. Box Number is Not Acceptable) **169 EAST FLAGLER STREET** 83 MIAMI FL 33131 84 City 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE KARP, BURTON J NAME 12 NAME CR2E034 32 HEMLOCK DRIVE STREET ADDRESS 1.3 STREET ADDRESS **ESSEX CT** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAMÉ BONIN, GARY L 2.2 NAME STREET ADDRESS 54 LAKE DRIVE 2.3 STREET ADDRESS **ENFIELD CT 06062** CITY-ST-ZIP 2. 4 City-St-ZIP DELETE XI Change Addition 3.1 TITLE TITLE MARSHALL, SANDRA L. 3.2 NAME NAME Marshall, Sandra L. 25 JEFFREY DRIVE STREET ADDRESS 3.3 STREET ADDRESS 39 Case Road **FARMINGTON CT** Burlington, CT CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE

CITY-ST-ZIP 14. Thereby 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 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 changled, or on an attraction with an address.

4. 2 NAME

5.1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5 3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-7IP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

Marshall 03/25/98 (860) 953-1231