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

Mailing Address

4126 NORLAND AVENUE

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

#205, 5275 OLD KENTUCKY ROAD



SIGNATURE: Peter S. Ryndman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 27 1997 8:00am

Secretary of State

1/13/97

(604) 299-9321

0530000

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9500000522 (1)

EAGLE FINANCIAL ASSOCIATES, INC.

BARNABY, B.C., CANADA VSG RUSSELLVILLE TN 37860 3. Date Incorporated or Qualified 3a. Date of Last Report 01/31/1995 10/15/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 62-1527687 21 26 Not Applicable Suite Ant. #. etc. Suite Apt # etc \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζiρ Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 Zip Code 85 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, typied or printed name of registered agent and tipe if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS (96/6) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ASD DELETE Change .... Addition 1.1 TITLE TIT1 F HYNDMAN, PETER S NAME 1.2 NAME CR2E034 **4126 NORLAND AVENUE** 1.3 STREET ADDRESS STREET ADDRESS BURNABY, B.C. V5G 3S8 CITY-ST-ZIP 1.4 CITY-ST-ZIF DELETE Change Addition 21 TITLE TITLE BALLANTYNE, W. GRANT 22 NAME NAME 4126 NORLAND AVENUE 2.3 STREET ADDRESS STREET ADDRESS BURNABY, B.C., CANADA V5G -3\$8 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MAYES, HERBERT A NAME 3.2 NAME SUITE 202 - 134 NORTH HENRY STREET STREET ADDRESS 3.3 STREET ADDRESS **MORRISTOWN TN 37814** 3.4 CITY-ST-ZIP CITY-SI-ZIP DELETE XX Change Addition TIFLE 4.1 TITLE SCHAEFER, F. DUANE NAME 4. 2 NAME 8303 Katy Freeway **801 TEAS ROAD** STREET ADDRESS 4.3 STREET ADDRESS Houston, TK 77024 CONROE TX 77303 CITY-ST-ZIP 4 4 CITY - ST - ZIP Addition DELETE Change 51 TITLE TITLE LOEWEN, RAYMOND L NAME 5.2 NAME 4126 NORLAND AVENUE 5.3 STREET ADDRESS STREET ADDRESS BURNABY, B.C. V5G 3SG 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAM: 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 City-St-ZiP CITY - ST - 74P 14. I do 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 annual report or supplemental annual report is true and accordate 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 his 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.