

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2004 8:00 am
Secretary of State

01-23-2004 90025 015 ***158.75

DOCUMENT # H60308

1. Entity Name
EAGLE CREEK COMMERCIAL COMPANY, INC.



Principal Place of Business
**2340 STANFORD COURT
NAPLES, FL 34112 US**

Mailing Address
**2340 STANFORD COURT
NAPLES, FL 34112 US**

03000000



2. Principal Place of Business

625 Eagle Creek Drive
Suite, Apt. #, etc.

3. Mailing Address

625 Eagle Creek Drive
Suite, Apt. #, etc.

01052004 Chg-P CR2E034 (10/03)

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number

59-2728764

Applied For

Not Applicable

Zip

34113

Country

USA

Zip

34113

Country

USA

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**AMICO, DAVID J
625 EAGLE CREEK DRIVE
NAPLES, FL 34113**

7. Name and Address of New Registered Agent

Name **Hanspeter Schwager**
Street Address (P.O. Box Number is Not Acceptable)
625 Eagle Creek Drive
City **Naples** FL Zip Code **34113**

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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

[Signature]
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **LIPS, HERBERT**
STREET ADDRESS **625 EAGLE CREEK DRIVE X**
CITY-ST-ZIP **NAPLES, FL 34113**

TITLE **PSD** ☒ Delete
NAME **AMICO, DAVID J.**
STREET ADDRESS **625 EAGLE CREEK DRIVE**
CITY-ST-ZIP **NAPLES, FL 34113**

TITLE **CTD** ☐ Delete
NAME **SCHWAGER, HANSPETER**
STREET ADDRESS **625 EAGLE CREEK DRIVE**
CITY-ST-ZIP **NAPLES, FL 34113**

TITLE **D** ☐ Delete
NAME **STEINEMANN, HANSJORG**
STREET ADDRESS **625 EAGLE CREEK DRIVE**
CITY-ST-ZIP **NAPLES, FL 34113**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P/S/D/C** ☒ Change ☐ Addition
NAME **Hanspeter Schwager**
STREET ADDRESS **625 Eagle Creek Drive**
CITY-ST-ZIP **Naples, FL 34113**

TITLE **T/D** ☒ Change ☐ Addition
NAME **Hansjorg Steinemann**
STREET ADDRESS **625 Eagle Creek Drive**
CITY-ST-ZIP **Naples, FL 34113**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #