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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J77181

1. Corporation Name

EAGLE DATA SYSTEMS, INC.

		Business
·	 ٠.	

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

125 SO. ALCANIZ ST. STE 4 PENSACOLA FL 32501

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

125 SO. ALCANIZ ST. STE 4 PENSACOLA FL 32501

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90153 010 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

850-434-1126

Not Applicable

3. Date Incorporated or Qualifed

6. Election Campaign Financing

Trust Fund Contribution

06/08/1987 4. FEI Number

59-2817030

Zip	Country	Zip	Co	Country		8. This corporation owes the curren	t year inta	ngible	1			
24	25	29	30	30		Personal Property Tax.		☐ Yes	□No			
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent												
				81	Name				Į			
GERI, JOHN G.				82	Street Add	dress (P.O. Box Number is Not Acceptabl	e)					
1250 PALISADES CIRCLE			-	Queen Au	Stoss (F. C. Box (to.) Box is the consequent							
PENSACOLA FL 32504				83								
								les Zin (
				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	. , , -								_ [
J.SINTIONE	Signature, typed or printed name of registered agent a				t signature requi	red when reinstating)	DATE					
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	CERS AND					
πLE	DP	רם רו	ELETE 1.17	πE	{			Change	1			
NAME .	PARRISH, A. FRANCES		1.2 N	AME	1		,		} ;			
STREET ADDRESS	2742 SUNRUNNER LANE		1.3 9	TREET	ADDRESS							
CITY-ST-ZIP	GULF BREEZE FL 32561		1.40	1.4 CITY-ST-ZIP								
ΠΙΕ	D	0	ELETE 2.1 T	ITLE	Ì			Change	Addition (
NAME	PARRISH, LAMAR D.		22 N	AME	-				1			
STREET ADDRESS	2742 SUNRUNNER LANE		2.3 \$	TREET	ADDRESS				1			
CITY-ST-ZIP	GULF BREEZE FL 32561	_	2.4	CITY-S	T-ZIP	وقعيبا يا مديون		<u>.</u>				
TITLE	D	□ D	ELETE 3.1 T	TLE	T.			☐ Change	☐ Addition			
NAME	GERI, JOHN G.		3.2 N	IAME					1			
STREET ADDRESS	1250 PALISADES CIRCLE		3.3 \$	TREET	ADDRESS				}			
CITY-ST-ZIP	PENSACOLA FL 32504		3.4.4	CITY-S	T-ZIP			_				
TITLE	D		ELETE 4.1 T	TLE				☐ Change	☐ Addition			
NAME	GERI, JEANETTE S.		4.2	VAME)				ļ			
STREET ADDRESS	1250 PALISADES CIRCLE		4.3 \$	TREET	ADDRESS				Į			
CITY-ST-ZIP	PENSACOLA FL 32504		4.4.0	aTY-S	r-zip							
TITLE		D		ITLE				Change	☐ Addition			
NAME			5.2 N	IAME	-				{ '			
STREET ADDRESS			5.3 §	TREET	ADDRESS				j			
CITY-ST-ZIP			5.4 (TY-S	r-ziP							
TITLE		D	ELETE 6.17	TILE				☐ Change	☐ Addition			
NAME			6.21	IAME					[]			
STREET ADDRESS			6.3 \$	TREET	ADDRESS				l i			
CITY-ST-ZIP			6.4 (TY-S	T-ZIP]			
14 Lhereby	certify that the information supplied with	this filing does not	qualify for the exi	empti	on stated in	Section 119.07(3)(i), Florida Statutes. I fo	urther cert	fy that the i	nformation			
14. I 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 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, with all other like empowered.												

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