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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **J82056** (9)

1. Corporation Name

2510 EAGLE, INC.

Principal Place of Business

**% KAREN L. GOLDSMITH
P.O. DRAWER 790
WINTER PARK FL 32790**

Mailing Address

**% KAREN L. GOLDSMITH
P.O. DRAWER 790
WINTER PARK FL 32790**



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

**GOLDSMITH, KAREN L.
2709 W. FAIRBANKS AVE
WINTER PARK FL 32789**

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 607.06(2) and 607.15(6), 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 607.06(9), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Agent for Service of Process

Signature of Registered Agent or Agent for Service of Process

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
	D HARKINS, PATRICK L.	1040 HOWELL HARBOR DRIVE	CASSELBERRY FL	☐
	D HARKINS, KATHLEEN M	1040 HOWELL HARBOR DR.	CASSELBERRY FL	☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1-12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ CHANGE	☒ ADDITION
	D Harkins, Patrick L., II	1003 Knollwood Court	Winter Springs, FL 32708	☐	☒
	D Harkins, John P.	1040 Howell Harbor Drive	Casselberry, FL 32707	☐	☒
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I do hereby certify that the information supplied with this filing is true and correct, and does not qualify for the exemption stated in Section 119.07(9)(a), Florida Statutes. I further certify that the information indicated in this annual 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 a person authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or a supplemental report or a filing.

SIGNATURE:

Patrick L. Harkins, II
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrick L. Harkins, II

3-15-96

407-629-2009

CR2E034 (12/95)