

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007 08:00 A
Secretary of State

DOCUMENT # K81508

1. Entity Name
BALD EAGLE EXPRESS, INC.



Principal Place of Business

% CHARLES MILLER
6739 HATCHER RD
LAKELAND, FL 33811

Mailing Address

% CHARLES MILLER
6739 HATCHER RD
LAKELAND, FL 33811



04012007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2946586

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MILLER, CHARLES
6739 HATCHER RD
LAKELAND, FL 33811

**DO NOT WRITE
IN THIS SPACE**

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, 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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MILLER, CHARLES
STREET ADDRESS	6739 HATCHER RD
CITY - ST - ZIP	LAKELAND, FL
TITLE	ST
NAME	MILLER, LEOLA
STREET ADDRESS	6739 HATCHER RD
CITY - ST - ZIP	LAKELAND, FL
TITLE	D
NAME	MERRITT, ELIZABETH
STREET ADDRESS	6739 HATCHER RD
CITY - ST - ZIP	LAKELAND, FL
TITLE	D
NAME	MERRITT, SCHUYLER
STREET ADDRESS	6739 HATCHER RD
CITY - ST - ZIP	LAKELAND, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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04/13/07-80022-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Leola Miller - Leola Miller*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-07
Date

863-646-5034
Daytime Phone #