FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # K98597 (3)

1. Corporation Name

EAGLE LIGHTING ASSOC., INC.

Principal Place of Business

7010 NW 23RD WAY
GAINESVILLE FL 32606

Mailing Address

7010 NW 23RD WAY
GAINESVILLE FL 32606

2. Principal Place of Business
21 ___
Suite, Apt. #, etc.
22 ___
City & State
23 ___
Zip
24 ___
Country
25 ___

2a. Mailing Address
26 ___
Suite, Apt. #, etc.
27 ___
City & State
28 ___
Zip
29 ___
Country
30 ___

3. Date Incorporated or Qualified: **06/28/1989**

3a. Date of Last Report: **02/14/1995**

4. FEI Number: **65-0130809** [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. [ ] Yes [ ] No

9. **Name and Address of Current Registered Agent**

RABELL, LINDA G.
7010 NW 23RD WAY
GAINESVILLE FL 32602

10. **Name and Address of New Registered Agent**
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 607.0502 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 ... Florida Statutes.

SIGNATURE: *Linda G Rabell* 4/19/96

12. OFFICERS AND DIRECTORS

TITLE	D	[ ] DELETE
NAME	RABELL, LINDA G.	
STREET ADDRESS	4831 NW 16TH PLACE	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1-1 TITLE		[ ] Change [ ] Addition
1-2 NAME		
1-3 STREET ADDRESS		
1-4 CITY-ST-ZIP		
2-1 TITLE		[ ] Change [ ] Addition
2-2 NAME		
2-3 STREET ADDRESS		
2-4 CITY-ST-ZIP		
3-1 TITLE		[ ] Change [ ] Addition
3-2 NAME		
3-3 STREET ADDRESS		
3-4 CITY-ST-ZIP		
4-1 TITLE		[ ] Change [ ] Addition
4-2 NAME		
4-3 STREET ADDRESS		
4-4 CITY-ST-ZIP		
5-1 TITLE		[ ] Change [ ] Addition
5-2 NAME		
5-3 STREET ADDRESS		
5-4 CITY-ST-ZIP		
6-1 TITLE		[ ] Change [ ] Addition
6-2 NAME		
6-3 STREET ADDRESS		
6-4 CITY-ST-ZIP		

CR2E034 (12/95)

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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Enrique J Rabell 4/22/96 904-371-7555*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR