

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010788

FILED
May 01, 2009
Secretary of State

Entity Name: EAGLE RECOVERY FOUNDATION, INC.

Current Principal Place of Business:

3049 CLEVELAND AVE.
#270
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

EAGLE RECOVERY FOUNDATION INC.
P.O.BOX 6173
FORT MYERS, FL 33911

New Mailing Address:

FEI Number: 01-0824057 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HEEMER, BARRY L
3049 CLEVELAND AVE.
#270
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

HEEMER, BARRY L
3983 E RIVER DR.
FORT MYERS, FL 33916 US

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.

SIGNATURE: BARRY L. HEEMER

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: HEEMER, BARRY L
Address: 3983 E RIVER DR.
City-St-Zip: FORT MYERS, FL 33916

Title: EO () Delete
Name: BEECHER, DENIS F
Address: 12522 POINCIANA DR.
City-St-Zip: FORT MYERS, FL 33908

Title: SEC. () Delete
Name: BEECHER, JANIS
Address: 12522 POINCIANA
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: HEEMER, BARRY L
Address: P.O.BOX 6173
City-St-Zip: FORT MYERS, FL 33911

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY L. HEEMER

CEO

05/01/2009

Electronic Signature of Signing Officer or Director

Date