

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005548

FILED
Apr 22, 2008
Secretary of State

Entity Name: PORT CHARLOTTE EAGLE'S NEST, INC.

Current Principal Place of Business:

4868 B TAMIAMI TRAIL
APT B
PORT CHARLOTTE, FL 339803053

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 3249
NORTH FORT MYERS, FL 339183249

New Mailing Address:

FEI Number: 65-0784541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASS, BILLY
15151 CASS DR.
#1
PUNTA GORDA, FL 33982 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CASS, BILLY
Address: 15151 CASS DR. #1
City-St-Zip: PUNTA GORDA, FL 33982

Title: S () Delete
Name: CASS, BEVERLY
Address: 15151 CASS DR. #1
City-St-Zip: PUNTA GORDA, FL 33982

Title: C () Delete
Name: SWINDLER, JIM
Address: 15046 BUCKEYE DR
City-St-Zip: FT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BEVERLY CASS

S

04/22/2008

Electronic Signature of Signing Officer or Director

Date