

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000097221

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: EAGLE TRI-CON SERVICES, INC.

**Current Principal Place of Business:**

3815B US HWY 1 N. #12  
COCOA, FL 32926

**New Principal Place of Business:**

3815B US HWY 1 N. #25  
COCOA, FL 32926

**Current Mailing Address:**

3815B US HWY 1 N. #12  
COCOA, FL 32926

**New Mailing Address:**

3815B US HWY 1 N. #25  
COCOA, FL 32926

FEI Number: 06-1646467

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CARR, LORI  
6995 KAYLOR AVE  
COCOA, FL 32927 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CARR, LORI  
Address: 6995 KAYLOR AVE  
City-St-Zip: COCOA, FL 32927

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORI CARR

OWNE

01/17/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date