2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000119492

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

JACKSONVILLE, FL 32224

JACKSONVILLE, FL 32224

KUNKEL, JOHN C

(X) Delete

4315 PABLO OAKS COURT, SUITE 1

Entity Name: EAGLES HIGH DEVELOPMENT, INC

FILED Apr 22, 2005 Secretary of State

Entity Nar	me: EAGLES	HIGH DEVELOPMENT, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
4315 PABLO OAKS COURT SUITE 1 JACKSONVILLE, FL 32224				4315 PABLO OAKS COURT			
				SUITE 1			
				JACKSONVILLE, FL 322249667			
Current Mailing Address:				New Mailing Address:			
4315 PABLO OAKS COURT SUITE 1				4315 PABLO OAKS COURT SUITE 1			
JACKSONVILLE, FL 32224				JACKSONVILLE, FL 322249667			
FEI Number:	: 20-1547151	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desire	ed ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
4315 PABL JACKSON The above in the State	e of Florida.	JŔT	purpose o	f changing i	ts registere	ed office or registered agent,	or both,
SIGNATU		nic Signature of Registered Ac				Data	
			jeni			Date	
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CONNERTY, H 4315 PABLO C) Delete UGH H JR. DAKS COURT, SUITE 1 E, FL 32224 US		Title: Name: Address: City-St-Zip:	4315 PABL	(X) Change () Addition Y, HUGH H JR. O OAKS COURT, SUITE 1 /ILLE, FL 322249667 US	
Title: Name: Address: City-St-Zip:	CONNERTY, H 4315 PABLO C			Title: Name: Address: City-St-Zip:		(X) Change () Addition OHN P O OAKS COURT, SUITE 1 /ILLE, FL 322249667 US	
Title: Name: Address:	KUNKEL, JOH	.) Delete N C PAKS COURT, SUITE 1		Title: Name: Address:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN C KUNKEL V 04/22/2005

() Change () Addition