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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P29677

(2)

EAGLE GROWTH SHARES, INC.

Principal Place of Business	Mailing Address	
% THE CORPORATION TRUST INCORPORATED 32 SOUTH STREET	% THE CORPORATION TRUST INCORPORAT	

FILED Jan 30 1998 8:00am Secretary of State



ΈD DO NOT WRITE IN THIS SPACE BALTIMORE MD 21202 BALTIMORE MD 21202 3. Date Incorporated or Qualified 06/05/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 13-2654171 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ĭ No Personal Property Tax due June 30. 29 30 ☐ Yes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 84 City 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, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD DELETE 1.1 TITLE D Change Addition TITLE BAXTER, DONALD H. NAME 1.2 NAME Keogh, James 1200 N FEDERAL HWY #424 1.3 STREET ADDRESS STREET ADDRESS 202 West Lyon Farm Road **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP Greenwich, CT DELETE Change Addition TITLE 2.1 TITLE D ROHE, RONALD F. 2.2 NAME NAME Utting, Robert A 1200 N FEDERAL HWY #424 2.3 STREET ADDRESS STREET ADDRESS 1 Place Ville Marie, P.O. Box 6001 **BOCA RATON FL** CITY - ST - ZIP 2. 4 CITY-ST-ZIP Montreal, Quebec DELETE Change Addition TITLE ST 3.1 TITLE Parson, Donald P NAME ROHE, RONALD F 3.2 NAME 666 3rd Avenue 1200 N FEDERAL HWY #424 STREET ADDRESS 3.3 STREET ADDRESS New York, NY **BOCA RATON FL** 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Спапде Addition TITLE 4.1 TITLE MCARTHUR, KENNETH W. 4. 2 NAME NAME 302 BAY ST STREET ADDRESS 4.3 STREET ADDRESS TORONTO ON 4.4 CITY - ST- ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TATLE n MEYER, ROBERT L 5.2 NAME NAME 25 GRIFFIN AVE/P O BOX 496 N/A 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BEDFORD HILLS NY** 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE FLAHERTY, THOMAS J NAME 6.2 NAME 400 OCEAN RD #175 6.3 STREET ADDRESS STREET ADDRESS

VERO BCH FL 6.4 CITY-ST-ZIP 14. I 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 annual report or supplemental annual 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:

CITY - ST - ZIP

Ronald F. Rohe

1/26/98

561-395-2155

(10/97 CR2E034