


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
Feb 19, 2004 08:00 AM  
Secretary of State

DOCUMENT # P93000067822	
1. Entity Name EAGLE CREST REALTY, INC.	

Principal Place of Business 1178 8TH AVE NE LARGO, FL 33770 US	Mailing Address 9098 130TH WAY N SEMINOLE, FL 33776 US
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**DO NOT WRITE IN THIS SPACE**



02062004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3203136	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  MILES, WILLIAM T 9098 130TH WAY N SEMINOLE, FL 33776	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent

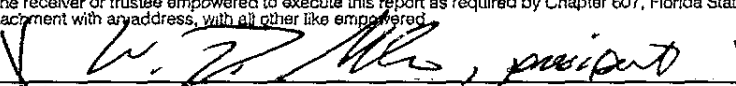
SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when changing registered office or agent)  
Signature, typed or printed name of registered agent and title if applicable DATE

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000056174 02/19/04-80009-012 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILES, WILLIAM T 9098 130TH WAY N SEMINOLE, FL 34646
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILES, GAIL P 9098 130TH WAY N SEMINOLE, FL 34646
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**DO NOT WRITE IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with any address, with all other like empowered

SIGNATURE:  2/10/04 150.00  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #