FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # **P94000038610** (9)

EAGLE PROPERTIES, INC.

Principal Place of Business Mailing Address							T 1884569 510 10117 61017 61011 60111 60111 66111 96111 96110 11101 11101 11101 11101 11101				
720 S ORANGE SARASOTA FL	1 / 1 · 1 · 7 · .		720 S ORANGE AVE SARASOTA FL 34236-7718								
							3. Date Incorporated or Qualified 05/13/1994		ate of Last F 20/1996	leport	
2. Principal Place of Business			2a. Mailing Address			4. FE! Number		A:	pplied For		
21			26			59-3250016			ot Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State			City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees					
Zip				Countr	Country 8. This corporation has liability for intar						
24	25	29		30					No		
	9, Name and Address of Curre	ent Registe	ered Agent	81		N	10. Name and Address of New Re	gistered	Agent		
STRODE, WILLIAM C					'	Name					
720 S ORANGE AVE SARASOTA FL 34236					L	Street Add	ddress (P.O. Box Number is Not Acceptable)				
				83	3						
				84	+	City		FL	85 Zip	Code	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stal m familiar with, and accept the obli	te of Florida	a. Such change was	authorized b	ıy ti	named cor he corpora	poration submits this statement for the retion's board of directors. I hereby acception's	urpose of of the app	changing i ointment as	ts registered registered	
SIGNATURE	•										
	Signature, typed or printed name of registered a				jent	signature requi	ired when reinstating)	DATE			
12.	OFFICERS AI	ND DIREC		13.			ADDITIONS/CHANGES TO OFFICE PS T	ERS AND	DIRECTOR Change	RS IN 12	
TITLE	GREER, ALLEN D.		☐ DELETE	1.1 TITLE		ے ا	REER, ALLEN D.		Li change	Adomon	
NAME	3713 KINGSWOOD DRIVE			1 2 NAME			10. BOX 176 (N/A)				
STREET ADDRESS	SARASOTA FL 34232			1.3 STREE		DDRESS C	ANGOR, CALIFORNIA	95	914		
CITY-ST-ZIP TITLE	DAIMOUN I E OVEDE		DELETE	1.4 CITY - 2 1 TITLE	51-	ZIP	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition	
NAME			beccie	2.2 NAME					C cuantic	☐ Addition	
STREET ADDRESS				2.3 STREE		nnecce					
CITY - ST - ZIP				2. 4 CITY							
TITLE			DELETE	3.1 TITLE	- 31 -	· ZIP			Change	Addition	
NAME				3.2 NAME							
STREET ADDRESS				3.3 STREE		DOBESS					
CITY - ST - ZIP				3.4. CITY-		1					
TITLE			DELETE	4.1 TITLE	91				Change	Addition	
NAME				4. 2 NAME	:	1					
STREET ADDRESS				4.3 STREE	TAD	ODRESS					
CITY-ST-ZIP				4.4 CITY -							
TITLE			DELETE	5.1 TITLE					Change	Addition	
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREE	TAD	DORESS					
CITY-ST-ZiP				5.4 CITY-							
TIFLE			DELETE	6.1 TITLE					Change	Addition	
NAME				6.2 NAME							
STREET ADDRESS				6.3 STREE	T AC	ODRESS					
0771 07 710											

14. If do 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.

FILED

Feb 18 1997 8:00am

Secretary of State