

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2007 08:00 A
Secretary of State

DOCUMENT # P94000054480

1. Entity Name
EAGLE INSTRUMENTS & CONTROLS, INC.



Principal Place of Business
2165 SUNNYDALE BLVD
SUITE H
CLEARWATER, FL 30265 US

Mailing Address
2165 SUNNYDALE BLVD
SUITE H
CLEARWATER, FL 30265 US



01152007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3247541

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

JACKSON, DANIEL W
2165 SUNNYDALE BLVD
SUITE H
CLEARWATER, FL 30265

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IN THIS SPACE**

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 DANIEL W JACKSON, JR Daniel W Jackson Jr 4/10/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	JACKSON, DANIEL W
STREET ADDRESS	2165 SUNNYDALE BLVD SUITE H
CITY-ST-ZIP	CLEARWATER, FL 30265
TITLE	V
NAME	JACKSON, DANIEL W JR
STREET ADDRESS	1573 PINEBREEZE DR
CITY-ST-ZIP	MARIETTA, GA 30062
TITLE	S
NAME	JACKSON, PATRICIA A
STREET ADDRESS	2851 CLUB VALLEY DR.
CITY-ST-ZIP	MARIETTA, GA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/20/07-80073-006 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empowered.

SIGNATURE: Daniel W Jackson Jr 4/10/07 727-447-9299
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #