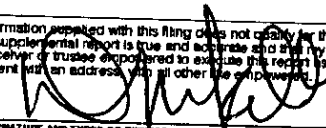


FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90780 032 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P95000008995					
1. Entity Name EAGLE CONSTRUCTION COMPANY OF SOUTH FLORIDA					
Principal Place of Business 1800 MARINA CIRCLE CAPE CORAL, FL 33909 US			Mailing Address 1800 MARINA CIRCLE CAPE CORAL, FL 33909 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 65-0560145				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KELLY, DANIEL M 1800 MARINA CIRCLE FORT MYERS, FL 33903				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				FL Zip Code	
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 _____ Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent's signature required when submitting)					
DATE _____					
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE	PVST ☐ Delete				
NAME	KELLY, DANIEL M				
STREET ADDRESS	1800 MARINA CIRCLE				
CITY-ST-ZIP	FORT MYERS, FL 33903				
TITLE	D ☐ Delete				
NAME	SUZANNE, KELLY				
STREET ADDRESS	1800 MARINA CIRCLE				
CITY-ST-ZIP	FORT MYERS, FL 33903				
TITLE	☐ Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information furnished 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 an address, with all other like filipments.					
SIGNATURE:  3/4/03 239-656-8879					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

10036165



☐ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)