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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADORESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 30 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000092931 (1)

EAGLE INVESTMENT & RETIREMENT SYSTEMS, INC.

Principal Place of Business 93-B ORANGE ST. ST. AUGUSTINE FL 32064		Mailing Address 93-B ORANGE ST. ST. AUGUSTINE FL 32084-3575							
						3. Date Incorporated or Qualified 12/04/1995	3a. Date 05/01		eport
<b>└</b>	Place of Business	2a. Mailing Address				4. FEI Number			oplied For
Suite, Apt.	# oto	<b>26</b>				59-3349622			ot Applicable
22		<b>├</b> ─-	27		5. Certificate of Status Desired		<b>ቅሪ./ጋ</b> / Fee Re	Additional equired	
City & Stat	le	City & State				6. Election Campaign Financing		\$5.00	- '
23		28				Trust Fund Contribution		Added t	
Zip	<b>├</b> ┐			Country		8. This corporation has liability for intengible tax under s. 199.032,			. 199.032,
24	25 9. Name and Address of Curre	29 30				Florida Statutes Yes No  10. Name and Address of New Registered Agent			
HAI	L, CHARLES E JR.	The grater our Aguit		81	Name	10. Name and Address of New Ac	gistored Agr	BIII	
	B ORANGE ST.			82	Cton of 6 ala	ress (P.O. Box Number is Not Acceptat	1.3		
	AUGUSTINE FL 32084			62	Street Add	ress (P.O. Box Number is Not Acceptar	ne)		
				83					
				84	City			<b>85</b> Zip (	Code
44 Pursuant	to the provisions of Factions 507.04	00 and 007 1600 Classida Otal	Lulan Alia			poration submits this statement for the p	FL		
office or agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig Signature typed or princed name of registered as	e of Florida. Such change wa gations of, Section 607.0505,	s authori Florida S	zed by Statutes	the corpora :	tion's board of directors. I hereby acce	ot the appoin	lment as	registered
12.		ND DIRECTORS		3.	in signature nego	ADDITIONS/CHANGES TO OFFIC		IRECTOP	RS IN 12
TITLE	PTD	OCLETE 1.11		1 TIILE				Change	Addition
NAME	HALL, CHARLES E JR.		1.3	2 NAME					
STREET ADDRESS	3770 LAUREL ST.		1,3	3 STRECT	ADDRESS				
CITY-ST-ZIP TITLE	ST. AUGUSTINE FL 32095			1.4 CITY - ST - ZIP 2.1 TITLE				1 0	A ( P)
NAME	HALL, LAURELLE A			2.2 NAME			L	J Change	Addition
STREET ADDRESS	3770 LAUREL ST.		2.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	OT ALIQUICITATE OF GOODE		4 CITY - S						
TITLE		☐ DELETE	3.1	1 TITLE				Change	Addition
NAME			3.3	S NAME					
STREET ADDRESS			R		ADDRESS				
CITY-ST-ZIP			4 CHY-S	II - ZIP		····	1 Channe	A 440:	
NAME		<del></del>		1 TITLE 2 NAMC			L.	J Change	Addition
STREET ADDRESS		•			ADDRESS				
CITY-ST-ZIP				4 CHY - S					
TITLE		DECETE		1 TITLE				Change	Addition
NAME	1		5.2	2 NAME					
STREET ADDRESS			5.3	3 STREE1	ADDRESS				
CITY-ST-ZIP		Dougle		4 CITY - S	T-ZIP		<del>_</del>	1	
TITLE		DELETE	6.1	1 TITLE			L	Change	Addition

14. I 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.