

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

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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000095076 (2)

1. Corporation Name
EAGLE H., INC.

Principal Place of Business
**1681 S. KIRKMAN RD., APT. 137
ORLANDO FL 32811**

Mailing Address
**1681 S. KIRKMAN RD., APT. 137
ORLANDO FL 32811-2232**



2. Principal Place of Business 21 4310 SUNTREE BLVD. Suite, Apt. #, etc. 22 City & State 23 ORLANDO FLORIDA Zip Country 24 32817 25 ORANGE		2a. Mailing Address 26 4310 SUNTREE BLVD Suite, Apt. #, etc. 27 City & State 28 ORLANDO FLORIDA Zip Country 29 32817 30 ORANGE		3. Date Incorporated or Qualified 12/13/1995	3a. Date of Last Report 08/12/1996
		4. FEI Number 59-3365167		Applied For Not Applicable	
		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent

HILL, NELSON W
1681 S. KIRKMAN RD., APT. 137
ORLANDO FL 32811

81 Name
82 NELSON W. HILL
83 Street Address (P.O. Box Number is Not Acceptable)
4310 SUNTREE BLVD.
84 City
ORLANDO
85 FL
86 Zip Code
32817

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE **Nelson W. Hill** **NELSON W. HILL** **4/27/97**
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P NAME HILL, NELSON STREET ADDRESS 1681 S KIRKMAN ROAD CITY-ST-ZIP ORLANDO FL	☐ DELETE	1.1 TITLE P 1.2 NAME NELSON W. HILL 1.3 STREET ADDRESS 4310 SUNTREE BLVD. 1.4 CITY-ST-ZIP ORLANDO, FL 32817	☒ Change ☐ Addition
TITLE V NAME HILL, NANCY STREET ADDRESS 1681 S KIRKMAN ROAD #137 CITY-ST-ZIP ORLANDO FL	☐ DELETE	2.1 TITLE V 2.2 NAME NANCY L. HILL 2.3 STREET ADDRESS 4310 SUNTREE BLVD 2.4 CITY-ST-ZIP ORLANDO, FL 32817	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ 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.

SIGNATURE: **Nelson W. Hill** **4/27/97** **(207) 477-8708**

CR2E034 (9/96)