## Bank of America | Online Banking | Accounts | Account Details 2008 FOR PROFIT-CORPORATION

ANNUAL REPORT

**DOCUMENT # P97000079333** 

1. Entity Name

**EAGLE RAY CORPORATION** 



FILED Jan 14, 2008 08:00 AN Secretary of State

Fee Required

Page 2 of 2

Principal Place of Business

3525 BONITA BCH RD., 102 BONITA SPRINGS, FL 34134 Mailing Address

3525 BONITA BCH RD., 102 BONITA SPRINGS, FL 34134



## DO NOT WRITE IN THIS SPACE

01102008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired 

\$8.75 Additional

6. Name and Address of Current Registered Agent

DIXON, JOLENE C 3525 BONITA BEACH RD 102 BONITA SPRINGS, FL 34135

## DO NOT WRITE IN THIS SPACE

the obliga	riamed entity submits this statement for the litions of registered agent.	ourpose of ci	ianging iis regi	, ,	orie	gistered agent, or bo	in, in the State	or Florida. I am i	arriiisar wili	n, and acce	pι
Signature, typed or printed name of registered agent and title 4 applicable (NOTE: Registered.					Agent signature required when reinstating)						
FILE NOWIL! FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.					\$5.00 May Be Added to Fees	01/15	,/08-80034	-022	150.00		
10.	OFFICERS AND DIRECTORS						<u> </u>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIXON, JOLENE C 3525 BONITA BEACH RD 102 BONITA SPRINGS, FL 34134										
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DIXON, CHRISTOPHER P 3525 BONITA BEACH RD 102 BONITA SPRINGS, FL 34134			į							
TITLE NAME STREET ADDRESS CITY-ST-ZIP						DO	NOT	WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						IN <sup>-</sup>	THIS	SPACE			
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NAME STREET ADDRESS CITY-ST-ZIP					L VAL				e gere		
12. I hereby of indicated of the conchanged,	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with a	ling does point accurate to execute to other like en	dualify for the and that my sight that my sight that my sight report as reappwered.	exemptions gnature shall equired by C	s cont I have thapte	ained in Chapter 119 the same legal effect of 607, Florida Statute	), Florida Statu et as il made ur es; and that my	tes. I further certif nder oath; that I ar name appears in	y that the n an office Block 10 o	information or or directo or Block 11	r it

SIGNATUS P/Balineeast 1. bankofamerica.com/ogi-ltm/jas/4bHfrm3uFSFPLcJnETjeKRVjlwI4f ks... 12/7/2007