

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000005140

FILED
Apr 28, 2004
Secretary of State

Entity Name: EAGLE VISION, INC.

Current Principal Place of Business:

310 WAYMONT CT
STE 104
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

310 WAYMONT CT
STE 104
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 59-3498175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PALMER GROUP INC
310 WAYMONT CT #104
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVS () Delete
Name: PALMER, CHARLES B
Address: 310 WAYMONT CT STE 104
City-St-Zip: LAKE MARY, FL 32746

Title: DPT (X) Delete
Name: DENTINGER, THOMAS A
Address: 33 N AMDEN AVENUE
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: PALMER, CHARLES B
Address: 310 WAYMONT CT STE 104
City-St-Zip: LAKE MARY, FL 32746

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES B PALMER

DPS

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date