

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000048646

1. Entity Name

EAGLE PROPERTY INVESTMENT CORPORATION

Principal Place of Business

8090 ATLANTIC BLVD. SUITE D73  
JACKSONVILLE FL 32211-8460

Mailing Address

8090 ATLANTIC BLVD. SUITE D73  
JACKSONVILLE FL 32211-8460

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3584077

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

RICHARD R. ZIMMERMAN

Street Address (P.O. Box Number is Not Acceptable)

8090 ATLANTIC BLVD No D73

City

JACKSONVILLE

FL

Zip Code

32211-8460

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

RICHARD R. ZIMMERMAN

8/2/00

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D  
NAME ZIMMERMAN, RICHARD R  
STREET ADDRESS 8090 ATLANTIC BLVD, SUITE D73  
CITY-ST-ZIP JACKSONVILLE FL 32211-8460 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/2/00

Date

904-74-2476

Daytime Phone #

CR2E034 (5/00)

**FILED**  
**Aug 24, 2000 8:00 am**  
**Secretary of State**

08-24-2000 90076 018 \*\*\*550.00



DO NOT WRITE IN THIS SPACE

Attachment # P99000048646  
D00800683

DOC# P99000048646

Dear Sir(s)

This is my First year  
as a Corporation.

I haven't had any  
business. I know

I messed up this year  
Promise, it's the <sup>Time</sup> Last year.

Any help you can give is  
APPRECIATED 😊