

DOCUMENT # P99000105679

1. Entity Name

EAGLE ELECTRICAL SYSTEMS, INC.

FILED

00 MAR 16 PM 12:00

SECRETARY OF STATE



DO NOT WRITE IN THIS SPACE

Principal Place of Business

7428 HERRICK'S LOOP  
ORLANDO FL 32835

Mailing Address

7428 HERRICK'S LOOP  
ORLANDO FL 32835

2. Principal Place of Business

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Zip

Country

4. FEI Number

59-3613709

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

NUGENT, KEVIN  
7428 HERRICK'S LOOP  
ORLANDO FL 32835

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

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 \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

| TITLE | NAME                | STREET ADDRESS             | CITY-ST-ZIP             | <input type="checkbox"/> Delete |
|-------|---------------------|----------------------------|-------------------------|---------------------------------|
|       | <i>Kevin Nugent</i> | <i>7428 Herrick's Loop</i> | <i>Orlando FL 32835</i> | <input type="checkbox"/>        |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|------|----------------|-------------|---------------------------------|
|       |      |                |             | <input type="checkbox"/>        |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|------|----------------|-------------|---------------------------------|
|       |      |                |             | <input type="checkbox"/>        |

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|-------|------|----------------|-------------|---------------------------------|
|       |      |                |             | <input type="checkbox"/>        |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|------|----------------|-------------|---------------------------------|
|       |      |                |             | <input type="checkbox"/>        |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|------|----------------|-------------|---------------------------------|
|       |      |                |             | <input type="checkbox"/>        |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE     | NAME         | STREET ADDRESS      | CITY-ST-ZIP      | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Add |
|-----------|--------------|---------------------|------------------|---------------------------------|---|
| President | Kevin Nugent | 7428 Herrick's Loop | Orlando FL 32835 | <input type="checkbox"/>        | <input checked="" type="checkbox"/>     |

| TITLE     | NAME         | STREET ADDRESS      | CITY-ST-ZIP       | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Add |
|-----------|--------------|---------------------|-------------------|---------------------------------|---|
| Secretary | Kevin Nugent | 7428 Herrick's Loop | Orlando, FL 32835 | <input type="checkbox"/>        | <input checked="" type="checkbox"/>     |

| TITLE     | NAME         | STREET ADDRESS      | CITY-ST-ZIP       | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Add |
|-----------|--------------|---------------------|-------------------|---------------------------------|---|
| Treasurer | Kevin Nugent | 7428 Herrick's Loop | Orlando, FL 32835 | <input type="checkbox"/>        | <input checked="" type="checkbox"/>     |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Add |
|-------|------|----------------|-------------|---------------------------------|------------------------------|
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Add |
|-------|------|----------------|-------------|---------------------------------|------------------------------|
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Add |
|-------|------|----------------|-------------|---------------------------------|------------------------------|
|       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>     |

I TS

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:

Kevin Nugent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-5-00 407-298-7443