

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/2/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

1995 JUL 13 AM 9:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V41815 (4)

1. Corporation Name
BIRDIE/EAGLE ENTERPRISES, INC.

Principal Place of Business Mailing Address
**4335 LONDONTOWN ROAD 4335 LONDONTOWN ROAD
TITUSVILLE FL 32796 TITUSVILLE FL 32796**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **06/30/1982** 3a. Date of Last Report **02/10/1994**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 <i>Jame</i>	26	59-3135321	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State <i>SAME</i>	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Country	Zip	Country
24	25	29	30

8. This corporation has liability for intangible tax under s. 194.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
JONES, BRIAN M 3895 RAMBLING ACRES DRIVE TITUSVILLE FL 32796		81 Name	ROBERT L CARLSON		
		82 Street Address (P.O. Box Number is Not Acceptable)	4335 LONDONTOWN RD		
		83			
		84 City	TITUSVILLE	FL	85 Zip Code

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 *Robert Carlson* **ROBERT CARLSON** *July 5, 95*
(Signature, typed or printed name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVST	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARSON, ROBERT L	1.2 NAME	
STREET ADDRESS	4335 LONDONTOWN RD	1.3 STREET ADDRESS	
CITY - ST - ZIP	TITUSVILLE FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARSON, ROBERT L	2.2 NAME	
STREET ADDRESS	4335 LONDONTOWN RD	2.3 STREET ADDRESS	
CITY - ST - ZIP	TITUSVILLE FL	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 in an attachment with an address.

SIGNATURE: *Robert Carlson* **ROBERT CARLSON** *July 5, 95* **407 269-4653**
(Signature, typed or printed name of signing officer or director) (Typed Name)

CR2E034 (3/95)