

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005
Secretary of State

DOCUMENT# N01000005749

Entity Name: EAGLE BOXING, DONE DEAL CHARITABLE ORGANIZATION INTERNATIONAL, INC.

Current Principal Place of Business:

New Principal Place of Business:

13180 S.W. 103RD STREET
DUNNELLON, FL 34432

Current Mailing Address:

New Mailing Address:

13180 S.W. 103RD STREET
DUNNELLON, FL 34432

FEI Number: 59-3750292 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CHASE, ANTHONY J SR.
13180 S.W. 103RD STREET
DUNNELLON, FL 34432 US

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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CHASE, ANTHONY J SR.
Address: 13180 S.W. 103RD STREET
City-St-Zip: DUNNELLON, FL 34432

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

Title: D () Delete
Name: CLARK, TROY H
Address: POST OFFICE BOX 12851
City-St-Zip: GAINESVILLE, FL 32604

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

Title: D () Delete
Name: WILSON, MICHAEL E PH.D.
Address: POST OFFICE BOX 561
City-St-Zip: BELLEVIEW, FL 34421

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY J. CHASE SR.

PSTD

05/02/2005

Electronic Signature of Signing Officer or Director

_____ Date