

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000004433 (5)**

1. Corporation Name

EAGLE RECYCLING, INC.



Principal Place of Business

Mailing Address

105 NORTH 22ND STREET
MEXICO BEACH FL 32410

105 NORTH 22ND STREET
MEXICO BEACH FL 32410

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

01/17/1995

N/A

4. FEI Number

Applied For

59-3305018

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

10. Name and Address of New Registered Agent

GRANTLAND, JAMES L
105 NORTH 22ND STREET
MEXICO BEACH FL 32410

81 Name

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

83

84 City

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

Signature typed or printed name of registered agent and their applicable block

Block Registered Agent Signature required when re-registering

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME GRANTLAND, JAMES L
STREET ADDRESS 105 NORTH 22ND STREET
CITY-ST-ZIP MEXICO BEACH FL 32410

1.1 TITLE Change Addition
1.2 NAME John
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VPD DELETE
NAME HABERNY, DALE
STREET ADDRESS P. O. BOX 446 N/A
CITY-ST-ZIP NEW BURY OH 44065

2.1 TITLE D Change Addition
2.2 NAME GRANTLAND, JOHN L.
2.3 STREET ADDRESS 412 7TH ST.
2.4 CITY-ST-ZIP Mexico Beach, FL 32410

TITLE D DELETE
NAME GRANTLAND, RICHARD
STREET ADDRESS P. O. BOX 13173 N/A
CITY-ST-ZIP MEXICO BEACH FL 32410

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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)(k), 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 on an attachment with an address.

SIGNATURE:

James L. Grantland
President

JAMES L. GRANTLAND

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 (904)639-3900

Date Daytime Phone #

CR2E034 (12/95)