## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Feb 07, 2007 08:00 AM DOCUMENT # P03000055114 **Secretary of State** STIMMEL ENVIRONMENTAL, INC. Principal Place of Business Mailing Address **3016 OBRIEN DRIVE 3016 OBRIEN DRIVE** TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32309 02052007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 37-1469695 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STIMMEL, WILLIAM DO NOT WRITE 3016 OBRIEN DRIVE TALLAHASSEE, FL 32309 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE STIMMEL, WILLIAM C NAME STREET ADDRESS 3016 OBRIEN DRIVE CITY-ST-ZIP TALLAHASSEE, FL 32309 TITLE NAME U00000625576 STREET ADDRESS 02/14/07-80080-015 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report on 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation of changed, or on an a

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP