FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N41831

1. Corporation Name

ENVIRONMENTAL AND PEACE EDUCATION CENTER, INC.

Principal Place of Business 12713-3 MCGREGOR BLVD. FT. MYERS FL 33919-4411

2. Principal Place of Business

Mailing Address

2a. Mailing Address

12713-3 MCGREGOR BLVD. FT. MYERS FL 33919-4411

FILED Feb 10, 1999 8:00am **Secretary of State** 02-10-1999 90052 021 ****61.25



3. Date Incorporated or Qualifed

01/28/1991

21		20				4.77			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				4. FEI Number 65-0238740			plied For
22		27				05-0230140			t Applicable
City & Stat	e	City & State				5. Certifcate of Status D	esired	\$8.75 A Fee Re	
Zip	Country	Zip	Count	try		6. Election Campaign Fi	nancing	\$5.00	May Be
24	25 29 3					Trust Fund Contribution	Added to Fees		
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address	of New Registe	ered Agent	
			8	31 1	Name				,
SWEET, CECILIA P.					Piront Address	n /B O. Boy Number is No	t Acceptable)	15. 0	
12713-3 MCGREGOR BLVD.				82 Street Address (P.O. Box Number is Not Acceptable)					
FT. MYERS FL 33919-4411									•
FT. WITCH	3 FE 33919-4411		<u> </u>			· · · · · · · · · · · · · · · · · · ·			
			8	34 (City			FL 85 Zip (Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617 1508 Florida Stati	utes the abo	ove-n	amed comor	ation submits this statemen	t for the purpo	 	registered
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorized b	ov the	e corporation	's board of directors. I here	by accept the a	appointment as re-	gistered
agent. I a	m familiar with, and accept the obliga	ations of, Section 617.0503, F	lorida Statute	es.			*	સીંચી કાર્સી કરક	
SIGNATURE							. DA1	-	
12.	Signature, typed or printed name of registered age	nt and title if applicable. (NO	13.	gent sig	gnature required w	ADDITIONS/CHANGES			RS IN 12
TITLE	DE	DELETE	1.1 TITLE			;	3 10 01110E11	☐ Change	Addition
			1.2 NAM			•			
NAME	HEINRICH, BARBARA C.								
STREET ADDRESS	22531 TUCKAHOE RD.		1.3 STRE						
CITY-ST-ZIP	ALVA FL	[] per ere	1.4 CITY		IP		.	☐ Change	Addition
TITLE	DP	☐ DELETE	2.1 TITLE					Change	
NAME	STANLEY, PHYLLIS		2.2 NAM	E				5	: .
STREET ADDRESS			2.3 STRE	EET AD	DRESS			·	
CITY-ST-ZIP	ALVA FL		2. 4 CiTY	r-ST-Z	UP UP				
TITLE	DT	☐ DELETE	3.1 TITLE	E				☐ Change	Addition
NAME	SWEET, CECILIA P.		3.2 NAMI	E					
STREET ADDRESS	1056S PUTNAM CT. SE		3.3 STRE	EET AD	DRESS				
CITY-ST-ZIP	LEHIGH ACRES FL		3.4. CITY	/- ST- Z	IP .				
MLE		☐ DELETE	4.1 TITLE	E				☐ Change	Addition Addition
NAME			4. 2 NAM	Æ				**	s
STREET ADDRESS			4.3 STRE	EETAD	ORES\$				24
CITY-ST-ZIP			4.4 CITY	-ST-ZI	Р				
TITLE		☐ DELETE	5.1 TITLE	Ε				☐ Change	☐ Addition
NAME			5.2 NAM	Ε					•
STREET ADDRESS			5.3 STRE	EETAD	ORESS				
CITY-ST-ZIP			5.4 CITY	-ST-ZI	P				·
TITLE		☐ DELETE	6.1 TITLE	E				Change	Addition
NAME	1 1 1 c 1 5		6.2 NAME	E		•			
STREET ADDRESS			6.3 STRE	ET AD	DRESS				
CITY-ST-ZIP			6.4 CITY	-ST-ZH	P				
	ertify that the information supplied wi	th this filing does not qualify f	or the every	ntion	etated in Sec	ction 119 07(3)(i) Florida S	tatutes I furthe	r certify that the it	nformation

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: