

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000056360

Entity Name: CADILLAC FINANCIAL, INC.

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

2640 GOLDEN GATE PARKWAY
SUITE 304
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

2640 GOLDEN GATE PARKWAY
SUITE 304
NAPLES, FL 34105

New Mailing Address:

FEI Number: 20-4753441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, J. MICHAEL
2640 GOLDEN GATE PARKWAY
SUITE 304
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: MEYER, ROBERT
Address: 300 HAYNES STREET
City-St-Zip: CADILLAC, MI 49601

Title: VP,D () Delete
Name: FERRIS, KIM
Address: 472 RAVEN WAY
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: MEYER, ROBERT
Address: 300 HAYNES STREET
City-St-Zip: CADILLAC, MI 49601

Title: D () Delete
Name: COLEMAN, J. MICHAEL
Address: 2640 GOLDEN GATE PARKWAY, SUITE 304
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. MICHAEL COLEMAN

D

01/09/2007

Electronic Signature of Signing Officer or Director

Date