### FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

# DOCUMENT # P30743 1. Corporation Name

CPTPFC, INC.

Principal Place	e of Business	M	ailing Address							
P. O. BOX 790104 P. O. BOX 790104										
SUITE MSH# 822 MSH#822								DO NOT WRITE IN T	LIIS SDACE	
ST. LOUIS MO 63179 ST. LOUIS MO 63179									HIS SPACE	
US	•	US						3. Date Incorporated or Qualifed 08/28/1990		
2. Principal P	lace of Business	2a.	Mailing Address					4. FEI Number	Ap	plied For
21		26						13-361 <u>4604</u>	No	t Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.			·		5. Certificate of Status Desired	<b>\$8.75</b> A Fee Re	
City & Stat	ra .	-   27	City & State					6. Election Campaign Financing	\$5.00	Máv Bể
23		28	,					Trust Fund Contribution	. Added t	
Zip Zip	Country	1201	Zip	Cou	intry			8. This corporation owes the current year	- Intangible	
24	25	29	•	30	•			Personal Property Tax.	, ☐ Yes	□No
241	9. Name and Address of Curre		tered Agent	100)	1			10. Name and Address of New Registe	ed Agent	
	o. Hallo and Addition of College				81	Name				
CT C	CORPORATION SYSTEM									
1200 S. PINE ISLAND ROAD			i i		82	82 Street Address (P.O. Box Number is Not Acceptable)			İ	
	NTATION FL 33324				83					
					0.3					
					84	City		pration submits this statement for the purpos	- <b>L</b>	Code
agent. I a	egistered agent, or both, in the State im familiar with, and accept the obligation.  Signature, typed or printed name of registered age	ations of	, Section 607.0505, Fig.	rida Stat	utes			n's board of directors: I hereby accept the a when reinstating)  DAT		
12.	. OFFICERS A			13.	, , .go	- vigi kitai	,	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PD . OF FICERS A	TO DIAL	DELETE	1.1 T	m F		1		☐ Change	Addition
	THE BUBERRY RICHARD	-	<del>X</del>	1.2 N			SE	E ATTACHED	_ ,	
NAME	12855 N OUTER 40 DR					LABBOECO				
STREET ADDRESS				- 1		ADDRESS	`			
CITY-ST-ZIP	ST LOUIS MO		□ DELETE	_	ITY-S	T-ZIP			☐ Change	Addition
TITLE	C		DELETE	2.1 T					Gridinge	
NAME	LEVINSON, CARL E			2.2 N						
STREET ADDRESS				2.3 \$	TREET	TADDRESS	i			1
CITY-ST-ZIP	ST LOUIS MO			_	ITY-S		—		70	
TITLE	AT	•	DELETE		MLE		1		☐ Change	☐ Addition ·
NAME	LOWRY, STEPHEN C			3.2 N	AME					,
STREET ADDRESS		t		3.3 S	TREET	TADORESS	1			ļ
CITY-ST-ZIP	ST. LOUIS MO			_	ITY-S	T-ZIP				r a delta: −
TITLE	S		☐ DEFELE	4.1 T	ITLE		1		☐ Change	Addition
NAME	BOYHER, JEFFERY L.			4.21	AME			•		
STREET ADDRESS	670 MASON RIDGE VENTER D	)		4.3 S	TREE	FADDRESS	i			
CITY-ST-ZIP	ST. LOUIS MO			4.4 0	ITY-S	T-ZIP	1			
TITLE	V.		☐ DELETE	5.1 T	ΠLE		1		☐ Change	Addition
NAME	JONES, ROBERT J			5.2 N	AME					Ì
STREET ADDRESS	12855 N OUTER 40 DR			5.3 S	TREE	FADDRESS	<b>;</b>			
CITY-ST-ZIP	ST LOUIS MO			5.4 0	ITY-S	T-ZIP	[			
TITLE	VP		☐ DELETE	6.1 T	ITLE				☐ Change	☐ Addition
NAME	COLVIN, KAREN			6.2 N	AME					ł
STREET ADDRESS	AGOSE N. OLITED FORTY DO			6.3 8	TREE	T ADDRESS	:			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ST PUIS MO 63141



4/12/99

(314) 851-6454

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90172 010 \*\*\*150.00

## CITIBAN( \*\*

Produced:

April 13, 1999

446947-90172-10 P30743

#### INVOICE INFORMATION

Payee Name

**Brief Description** 

FL Department Of S FL-CPT Annual Report

Mailing Address

P O Box 1500

Tallahassee, FL 32302-1500

#### **CENERAL INFORMATION**

State Code

FL

CPT

**Brief Description** 

FL-CPT Annual Report

Registered Agent

C T Corporation System

1200 South Pine Island Rd. Plantation, Florida 33324

Company Code

**Business Activity** 

Mortgage Loan-Inactive

Co. Name-Address

CPTPFC, Inc.

12855 N. Outer Forty Drive, MS 822

St. Louis, MO 63141

#### INITIAL FINANCIAL INFORMATION

Federal

Tax ID

iax<u>iu</u>

Capital Stock

Authorized

<u>Issued</u>

Par

No Par

13-361-4604

Common

400.000 4.

100,000 Authorized

\$1.00

State of

Date of

Incorporation

<u>Incorporation</u>

Fiscal Period

Delaware

07-24-1990

December 31

#### CURRENT FINANCIAL INFORMATION .....

Value Of Property

#### LIST OF OFFICERS AND DIRECTORS

Produced:

April 13, 1999

CPTPFC, Inc. 12855 N. Outer Forty Drive, MS 822 St. Louis, MO 63141

446947-90172-10

NAME/TULE//ADDRESS

BIRTH DATE DIRECTOR FFECTIVE DATE 09/13/1946

Yes

Carl Levinson, Chairman-CEO 113 Great Oaks Road East Hills, NY 11577

Jeffery Boyher, Asst. Sec.-V.Pres. 127 Country Creek Court Ballwin, MO 63011

Stephen C. Lowry, Asst. Treas.-V.Pres. 11204 Sherwood Oak Court St. Louis, MO 63146

Robert J. Jones, Vice President 1258 King's Trail Fenton, MO 63026

10/21/1953

07/18/1953

05/22/1965

Νo

No

No

Karen Colvin, Asst. Vice President 441 Reavis Place St. Louis, MO 63119

06/11/1957

No

Robert M. Franzen, Sr. Vice President 17154 Surrey View Chesterfield, MO 63005

09/13/1946

No