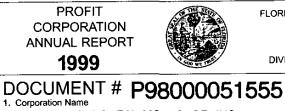
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

1999

CEC ENVIRONMENTAL MORTGAGE, INC.

DIVISION OF CORPORATIONS

## **FILED** Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90087 034 \*\*\*158.75



|--|--|

Principal Place of Business Mailing Address						
106 S HORSE		3106 S HORSEHOE DRI	VE			
APLES FL 341	104	NAPLES FL 34104				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						06/04/1998
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
		26				65 - 0891644 Not Applicab
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
2		27				5. Certificate of Status Desired Fee Required
City & Stat	te	City & State				6. Election Campaign Financing \$5.00 May Be
3		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible
ı	25	29	30			Personal Property Tax. Yes You
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered Agent
000	NAME DENINIC C			81	Name	
	WN, DENNIS C	•		82	Street Add	ddress (P.O. Box Number is Not Acceptable)
	ID, SCHOENECK AND KING, P.A	١.	·			
	7 THIRD STREET SOUTH			83		
NAP	LES FL 34102			0.4	Cibi	■■ 85 Zip Code
				84	City	FL ( )
12	Signature, typed or printed name of registered age			Agent	signature require	uired when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	·	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D CTERUEN MICHAELE	☐ DELETE				
IAME	STEPHEN, MICHAEL F		1.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	NAPLES FL 34104	□ pr: cre		ry-st	-ZIP	☐ Change ☐ Addi
TITLE	D DANIE POLICIAO	☐ DELETE				
NAME	DANE, DOUGLAS J		2.2 NA			
STREET ADDRESS					ADDRESS	,
CITY-ST-ZIP	NAPLES FL 34104	Florist		TY-ST	r-ZIP	☐ Change ☐ Addi
TITLE	D DAVIDE	☐ DELETE				1 one ige □ 1 dat
NAME	WESTON, DAVID E		3.2 N/			
STREET ADDRESS					ADDRESS	•
CITY-ST-ZIP	NAPLES FL 34104	☐ DELETE		TY-\$1	-ZIP	☐ Change ☐ Addi
TITLE	D UNITED STEDUENT	□ DELETE				
NAME	HILFIKER, STEPHEN F		4. 2 N		* DODGCC	
STREET ADDRESS	4131 5TH AVENUE SW NAPLES FL 34119				ADDRESS	
CITY-ST-ZIP	NAPLES PL 34119	☐ DELETE		TY-ST	-ZIP	☐ Change ☐ Addi
TITLE		[] OCTETE	5.1 TT 5.2 N/			
NAME					ADDRESS	•
STREET ADDRESS	]			KEET TY-ST		·
CITY-ST-ZIP		☐ DELETE			- cir	☐ Change ☐ Addi
TITLE		C DEFEIC	6.2 N/			
NAME	1				ADDRESS	•
STREET ADDRESS	<b>6</b>			REET TY-ST	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.

SIGNATURE:

STEPHEN F. HILFIKER