

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 90832 012 ***150.00

DOCUMENT # P99000047997

1. Entity Name
FIRST ENVIRONMENTAL MORTGAGE, INC.

Principal Place of Business
 1210 WILDWOOD LAKES BLVD., #105
 NAPLES FL 34104

Mailing Address
 1210 WILDWOOD LAKES BLVD., #105
 NAPLES FL 34104

2. Principal Place of Business
 3106 S. Horseshoe Dr.

3. Mailing Address
 3106 S. Horseshoe Dr.

City & State Naples FL

City & State Naples FL

Zip 34104 **Country**

Zip 34104 **Country**

4. FEI Number 65-0922626

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GARLICK, THOMAS B
 8889 PELICAN BAY BLVD. STE. 300
 NAPLES FL 34108

7. Name and Address of New Registered Agent

Name Garlick, Thomas B.

Street Address (P.O. Box Number is Not Acceptable) 5551 Ridgewood Dr. Ste. 101

City Naples **FL** **Zip Code** 34108

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.

SIGNATURE *Stephen F. Hilfiaker* **STEPHEN F. HILFIKER** **(239) 437-5720**
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **3-20-02**
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	HILFIKER, STEPHEN	
STREET ADDRESS	4131 FIFTH AVENUE S.W.	
CITY-ST-ZIP	NAPLES FL 34119	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Hilfiaker, Stephen	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	17200 Stepping Stone Drive	
STREET ADDRESS	FT MYERS, FL 33912	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stephen F. Hilfiaker* **STEPHEN F. HILFIKER** **(239) 437-5720**
 Signature and typed or printed name of signing officer or director **3/20/02**
 Date Daytime Phone #

0498274 AV

CR2E034 (9/01)