


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 01, 2005 08:00**  
**Secretary of State**

**DOCUMENT # F04000003012**

1. Entity Name  
 PEOPLE'S CHOICE FUNDING, INC.



Principal Place of Business  
 7515 IRVINE CENTER DR  
 IRVINE, CA 92618

Mailing Address  
 7515 IRVINE CENTER DR  
 IRVINE, CA 92618



02112005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 20-1156865

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT KORNSWIET, NEIL B 7515 IRVINE CENTER DR IRVINE, CA 92618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS GUBMAN, IRWIN L 7515 IRVINE CENTER DR IRVINE, CA 92618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PLANTIKO, BRAD S 7515 IRVINE CENTER DR IRVINE, CA 92618
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Irwin L. Gubman 2/28/05 (949) 265-1840  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #