

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003717

FILED
Jul 07, 2008
Secretary of State

Entity Name: INTERNATIONAL FUNDING, LTD., INC.

Current Principal Place of Business:

1 SOUTH PINCKNEY STREET, SUITE 800
MADISON, WI 53703

New Principal Place of Business:

Current Mailing Address:

1 SOUTH PINCKNEY STREET, SUITE 800
MADISON, WI 53703

New Mailing Address:

FEI Number: 39-1820226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEHMAN, ROBERT R
1660 SOUTH A1A
#211
JUPITER, FL 33477 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LEHMAN, ROBERT R
Address: 619 FARWELL DRIVE
City-St-Zip: MADISON, WI 53704

Title: VP () Delete
Name: FLINT, LAURA J FINANCE
Address: 6 LOOMIS CIRCLE #7
City-St-Zip: MADISON, WI 53704

Title: EVP () Delete
Name: MILLER, RACHEL S
Address: 811 FARWELL DRIVE
City-St-Zip: MADISON, WI 53704

Title: ASP () Delete
Name: MILLER, RACHEL S
Address: 811 FARWELL DRIVE
City-St-Zip: MADISON, WI 53704

Title: DT () Delete
Name: WALLBANK, NIGEL D
Address: 9501 NE 2ND AVE
City-St-Zip: MIAMI SHORES, FL 33138

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT R. LEHMAN

PRES

07/07/2008

Electronic Signature of Signing Officer or Director

Date