

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000010532

**Entity Name:** FUNKTION ENTERPRISES, INC.

**Current Principal Place of Business:**

805 S.W. 52ND STREET  
CAPE CORAL, FL 33914

**Current Mailing Address:**

805 S.W. 52ND STREET  
CAPE CORAL, FL 33914

**FEI Number:** 65-0553468

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FUNK, ELEANOR J  
805 S.W. 52ND STREET  
CAPE CORAL, FL 33914 US

*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

**Officer/Director Detail :**

Title	P	Title	VP
Name	FUNK, ELEANOR J	Name	FUNK, ROBERT G
Address	805 S.W. 52ND STREET	Address	805 S.W. 52ND STREET
City-State-Zip:	CAPE CORAL FL 33914	City-State-Zip:	CAPE CORAL FL 33914

*I hereby 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 all other like empowered.*

**SIGNATURE:** ELEANOR JANE FUNK

**PRESIDENT**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date