

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

**FILED**  
**Mar 17, 1999 8:00 am**  
**Secretary of State**

03-17-1999 90081 022 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
--	---	--

**DOCUMENT # 824258**

1. Corporation Name  
**HAMPSHIRE FUNDING, INC.**

Principal Place of Business ONE GRANITE PLACE CONCORD NEW HAMPSHIRE 03301	Mailing Address ONE GRANITE PLACE CONCORD NEW HAMPSHIRE 03301
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

3. Date Incorporated or Qualified <b>03/20/1970</b>	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number <b>02-0277842</b>	
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>
	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ANGARELLA, RONALD R	
STREET ADDRESS	22 PEPIN DRIVE	
CITY-ST-ZIP	BOW NH 03304	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	CHARLES C. CORNELIO	
STREET ADDRESS	14 LESNYK ROAD	
CITY-ST-ZIP	GOFFSTOWN NH 03045	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HARDIMAN, CAROL, R	
STREET ADDRESS	LANE RD	
CITY-ST-ZIP	CHICHESTER NH	
TITLE	T	<input type="checkbox"/> DELETE
NAME	WESTON, JOHN A.	
STREET ADDRESS	15 MERRIMACK STREET	
CITY-ST-ZIP	CONCORD NH	
TITLE	S	<input type="checkbox"/> DELETE
NAME	LEASE, SHARI J	
STREET ADDRESS	37 NO. CURTISVILLE RD.	
CITY-ST-ZIP	CONCORD OH 03301	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	1802 Regents Park Ln.
2.4 CITY-ST-ZIP	Greensboro, NC 27455
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	One Paradise Lane
3.4 CITY-ST-ZIP	Chichester, NH 03234
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: Shari J. Lease Secretary Date: 2/8/99 Daytime Phone #: (603) 236-5000

CR2E034 (11/98)

040000-10001-20  
824258

Hampshire Funding, Inc.  
One Granite Place  
Concord, New Hampshire 03301

December 31, 1998

## DIRECTORS

Ronald R. Angarella  
22 Pepin Drive  
Bow, NH 03304

Dennis R. Glass  
3 Loch Ridge Ct.  
Greensboro, NC 27408

E. Jay Yelton  
304 St. Lauren Dr.  
Greensboro, NC 27401

## OFFICERS

Ronald R. Angarella - Chairman and President  
22 Pepin Dr.  
Bow, NH 03304

Charles C. Cornelio - Vice President  
1802 Regents Park Ln.  
Greensboro, NC 27455

Carol R. Hardiman - Vice President  
One Paradise Lane Administration  
Chichester, NH 03234

Shari J. Lease - Secretary  
37 N. Curtisville Rd.  
Concord, NH 03301

John A. Weston - Treasurer  
15 Merrimack St.  
Concord, NH 03301