

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000369

FILED
Jan 11, 2005
Secretary of State

Entity Name: FLEXPOINT FUNDING CORPORATION

Current Principal Place of Business:

30 EXECUTIVE PARK, SUITE 200
IRVINE, CA 92614

New Principal Place of Business:

Current Mailing Address:

30 EXECUTIVE PARK, SUITE 260
IRVINE, CA 92614

New Mailing Address:

30 EXECUTIVE PARK, SUITE 200
IRVINE, CA 92614

FEI Number: 33-0806023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE RESEARCH SOLUTIONS, INC.
1333 N. DUVAL STREET
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KNOTT, RYAN
Address: 30 EXECUTIVE PARK, SUITE 260
City-St-Zip: IRVINE, CA 92614

Title: SCD () Delete
Name: GORDON, STANLEY
Address: 30 EXECUTIVE PARK, SUITE 260
City-St-Zip: IRVINE, CA 92614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: RYAN KNOTT

PD

01/11/2005

Electronic Signature of Signing Officer or Director

Date