

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000746

FILED
Apr 05, 2008
Secretary of State

Entity Name: NEW ENGLAND FUNDING CORP

Current Principal Place of Business:

29 DAVIS RIDGE RD
HARFORDS POINT TOWNSHIP
GREENVILLE JCT, ME 04442 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 315
GREENVILLE JCT, ME 04442

New Mailing Address:

FEI Number: 01-0539452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRICKSON, THOMAS O P
1424 NEW BOLTON DR
PORT ORANGE, FL 32129 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: P () Delete
Name: HENDRICKSON, THOMAS O
Address: P.O. BOX 315
City-St-Zip: GREENVILLE JCT, ME 04442 US

Title: VST (X) Delete
Name: HENDRICKSON, CAROLYN R
Address: P.O. BOX 315
City-St-Zip: GREENVILLE JCT, ME 04442 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: HENDRICKSON, THOMAS O
Address: P.O. BOX 315
City-St-Zip: GREENVILLE JCT, ME 04442 US

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: THOMAS O HENDRICKSON

P

04/05/2008

Electronic Signature of Signing Officer or Director

Date