



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90041 016 ***150.00

DOCUMENT # F02000002196					
1. Entity Name AEGIS FUNDING CORPORATION					
Principal Place of Business 3250 BRIAIRPARK DR STE 400 HOUSTON, TX 77042			Mailing Address 3250 BRIAIRPARK DR STE 400 HOUSTON, TX 77042		
2. Principal Place of Business 3250 Briarpark Drive Suite, Apt. #, etc. Suite 400		3. Mailing Address 3250 Briarpark Drive Suite, Apt. #, etc. Suite 400			
City & State Houston, TX		City & State Houston, TX		4. FEI Number 77-0589886	
Zip 77042		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PD NAME THOMPSON, D. RICHARD STREET ADDRESS 3250 BRIARPARK DR STE 400 CITY-ST-ZIP HOUSTON, TX 77042	<input type="checkbox"/> Delete		TITLE D NAME D. Richard Thompson STREET ADDRESS 3250 Briarpark Drive, Suite 400 CITY-ST-ZIP Houston, TX 77042	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VS NAME BALOG, MICHAEL C STREET ADDRESS 3250 BRIARPARK DR STE 400 CITY-ST-ZIP HOUSTON, TX 77042	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VTD NAME MARVIN, STUART D STREET ADDRESS 3250 BRIARPARK DR STE 400 CITY-ST-ZIP HOUSTON, TX 77042	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME DANGELO, JOHN J STREET ADDRESS 10049 N REIGER RD CITY-ST-ZIP BATON ROUGE, LA 70809	<input checked="" type="checkbox"/> Delete		TITLE PD NAME Neil J. Notkin STREET ADDRESS 3250 Briarpark Drive, Suite 400 CITY-ST-ZIP Houston, TX 77042	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete		TITLE V NAME Michael L. Conte STREET ADDRESS 7751 Belfort Parkway, Suite 210 CITY-ST-ZIP Jacksonville, FL 32256	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Michael C. Balog</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Michael C. Balog, EVP & Secretary <u>2/27/04</u> (713) 787-0100 <small>Date Daytime Phone #</small>		