

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002313

FILED
Mar 19, 2009
Secretary of State

Entity Name: CAPITAL FUNDING SOLUTIONS, INC.

Current Principal Place of Business:

330 NORTH ANDREWS AVENUE
SUITE 101
FT. LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

330 NORTH ANDREWS AVENUE
SUITE 101
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 04-3739302 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURLEY, GREG
704 SOUTHEAST 8TH STREET
FT. LAUDERDALE, FL 33316 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: PRES () Delete
Name: CURLEY, GREG
Address: 704 SOUTHEAST 8TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: CD () Delete
Name: CURLEY, GREG
Address: 704 SOUTHEAST 8TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: CD (X) Delete
Name: PORTER, GREGORY C VP
Address: 14125 WHISPERWOOD DRIVE
City-St-Zip: CLEARWATER, FL 33762

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CURLEY, GREG PRES
Address: 3501 N OCEAN DR., # 7B
City-St-Zip: HOLLYWOOD, FL 33019

Title: VP (X) Change () Addition
Name: PORTER, GREG VP
Address: 14125 WHISPERWOOD DR.
City-St-Zip: CLEARWATER, FL 33762

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: GREG CURLEY

PRES

03/19/2009

Electronic Signature of Signing Officer or Director

_____ Date