

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000003225

Entity Name: KENNEDY FUNDING, INC.

FILED
Nov 16, 2004
Secretary of State

Current Principal Place of Business:

TWO UNIVERSITY PLAZA, STE. 402
HACKENSACK, NJ 07601

New Principal Place of Business:

Current Mailing Address:

TWO UNIVERSITY PLAZA, STE. 402
HACKENSACK, NJ 07601

New Mailing Address:

FEI Number: 22-2862077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRELL, ROY G JR.
200 CENTRAL AVE., STE. 1600
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

NOAH, DENIS H
1715 MONROE STREET
FORT MYERS, FL 33901 US

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: DENIS H. NOAH

11/16/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: WOLFER, JOSEPH
Address: TWO UNIVERSITY PLAZA, STE. 402
City-St-Zip: HACKENSACK, NJ 07601

Title: VC () Delete
Name: WOLFER, CAROL
Address: TWO UNIVERSITY PLAZA, STE. 402
City-St-Zip: HACKENSACK, NJ 07601

Title: P () Delete
Name: WOLFER, JEFFREY
Address: TWO UNIVERSITY PLAZA, STE. 402
City-St-Zip: HACKENSACK, NJ 07601

Title: VP () Delete
Name: WOLFER, GREGG
Address: TWO UNIVERSITY PLAZA, STE. 402
City-St-Zip: HACKENSACK, NJ 07601

Title: S () Delete
Name: WOLFER, KEVIN
Address: TWO UNIVERSITY PLAZA, STE. 402
City-St-Zip: HACKENSACK, NJ 07601

Title: T () Delete
Name: WOLFER, CAROL
Address: TWO UNIVERSITY PLAZA, STE. 402
City-St-Zip: HACKENSACK, NJ 07601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEFFREY WOLFER

P

11/16/2004

Electronic Signature of Signing Officer or Director

Date