

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003225

Entity Name: KENNEDY FUNDING, INC.

FILED  
Apr 06, 2009  
Secretary of State

## Current Principal Place of Business:

TWO UNIVERSITY PLAZA, STE. 402  
HACKENSACK, NJ 07601 US

## New Principal Place of Business:

## Current Mailing Address:

TWO UNIVERSITY PLAZA, STE. 402  
HACKENSACK, NJ 07601 US

## 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:

NOAH, DENIS H  
1715 MONROE STREET  
FORT MYERS, FL 33901 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: WOLFER, JEFFREY  
Address: TWO UNIVERSITY PLAZA, SUITE 402  
City-St-Zip: HACKENSACK, NJ 07601 US

Title: VPD ( ) Delete  
Name: WOLFER, GREGG  
Address: TWO UNIVERSITY PLAZA, SUITE 402  
City-St-Zip: HACKENSACK, NJ 07601 US

Title: STD ( ) Delete  
Name: WOLFER, KEVIN  
Address: TWO UNIVERSITY PLAZA, SUITE 402  
City-St-Zip: HACKENSACK, NJ 07601 US

## 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:

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: JEFFREY WOLFER

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date