

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006703

FILED
Jul 07, 2006
Secretary of State

Entity Name: VALUE MORTGAGE FUNDING, INC.

Current Principal Place of Business:

8361 E. GELDING DR.
SUITE B
SCOTTSDALE, AZ 85260 US

New Principal Place of Business:

Current Mailing Address:

8361 E. GELDING DR.
SUITE B
SCOTTSDALE, AZ 85260 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDOVAL, ERNEST
1411 N. PENNINSULA AVE
NEW SMYRNA, FL 32169 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: ATAMIAN, HENRI D
Address: 8361 E. GELDING DR
City-St-Zip: SCOTTSDALE, AZ 85260 US

Title: ST () Delete
Name: ATAMIAN, ERIC R
Address: 3461 MIDNIGHT MOON ST
City-St-Zip: LAS VEGAS, NV 89135 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: ATAMIAN, ERIC R
Address: 3461 MIDNIGHT MOON ST
City-St-Zip: LAS VEGAS, NV 89135 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIC ATAMIAN

VP

07/07/2006

Electronic Signature of Signing Officer or Director

_____ Date