

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F07000002022

Entity Name: NRF FUNDING CORP.

FILED
Dec 23, 2009
Secretary of State

Current Principal Place of Business:

9 S LONG BEACH RD
ROCKVILLE CENTRE, NY 11570

New Principal Place of Business:

Current Mailing Address:

9 S LONG BEACH RD
ROCKVILLE CENTRE, NY 11570

New Mailing Address:

FEI Number: 11-3546514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORIDA COMPLIANCE SPECIALISTS, INC.
2333 HASEN LN
STE 3
TALLAHASSEE, FL 32301 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: DAVE TAYLOR

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: SKARREN, FRANK
Address: 9 S LONG BEACH RD
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: VPST () Delete
Name: MADDENN, RICHARD
Address: 9 S LONG BEACH RD
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: D () Delete
Name: MADDENN, RICHARD
Address: 9 S LONG BEACH RD
City-St-Zip: ROCKVILLE CENTRE, NY 11570

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: RICHARD MADDEN

VP

12/23/2009

Electronic Signature of Signing Officer or Director

Date