

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004092

FILED
Apr 14, 2009
Secretary of State

Entity Name: PALISADES FUNDING CORPORATION

Current Principal Place of Business:

150 RIVER ROAD
UNIT G-3A
MONTVILLE, NJ 07045

Current Mailing Address:

PO BOX 255
MONTVILLE, NJ 07045

New Principal Place of Business:

150 RIVER ROAD
UNIT G-3-A
MONTVILLE, NJ 07045 US

New Mailing Address:

PO BOX 255
MONTVILLE, NJ 07045 US

FEI Number: 22-3670318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERMAN, MITCHELL CPA
443 NW LISSMORE LN
PORT ST. LUCIE, FL 34986 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: VANDAGRIFF, VICTORIA
Address: 150 RIVER ROAD #G-3A
City-St-Zip: MONTVILLE, NJ 07045

Title: STD () Delete
Name: HERMAN, NANCY
Address: 150 RIVER ROAD #G-3A
City-St-Zip: MONTVILLE, NJ 07045

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NANCY S. HERMAN

STD

04/14/2009

Electronic Signature of Signing Officer or Director

Date