

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90125 002 ***150.00

DOCUMENT # F94000004505

1. Corporation Name

JHM FUNDING, INC.

Principal Place of Business

225 LIBERTY ST.
WFC. SO. TWR. 8TH FLR.
NEW YORK NY 10080-6114

Mailing Address

225 LIBERTY ST.
WFC. SO. TWR. 8TH FLR.
NEW YORK NY 10080-6114

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/30/1994

4. FEI Number

13-3461822

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD.
1406 HAYS STREET, STE. #2
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPST
NAME VA:ENTI, JOESPH S
STREET ADDRESS 225 LIBERTY STREET WFC. S. TWR.
CITY-ST-ZIP NEW YORK NY 10080

☐ DELETE

TITLE VD
NAME WIDENER, THOMAS W
STREET ADDRESS 250 VESEY ST., WFC. NO. TWR.
CITY-ST-ZIP NEW YORK NY 10281

☐ DELETE

TITLE PCD
NAME LANE, CLINTON W
STREET ADDRESS 250 VESEY ST., WFC. NO. TWR.
CITY-ST-ZIP NEW YORK NY 10281

☐ DELETE

TITLE VPST
NAME HAUGH, GERRARD M
STREET ADDRESS 225 LIBERTY ST., WFC. SO. TWR.
CITY-ST-ZIP NEW YORK NY 10080

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☒ Addition

VPASAT
TOONE, KIRA J.
225 LIBERTY ST., SO-TOWER, 14 FLOOR
NEW YORK, NY 10080-6114

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☒ Addition

VPAS
TOMASELLI, JEAN M.
250 VESEY ST., NO-TOWER, 24 FLOOR
NEW YORK, NY 10080-1324

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KIRA J. TOONE

Date

04/28/99

Daytime Phone #

(212) 236-7203

CR2E034 (11/98)