

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **F96000006060**
1. Corporation Name
FIRST NATIONAL FUNDING CORPORATION OF AMERICA

Principal Place of Business
**440 RT 17 N
HASBROUCK HEIGHTS NJ 07604**

Mailing Address
**440 RT 17 N
HASBROUCK HEIGHTS NJ 07604**

FILED
Jul 26, 1999 8:00 am
Secretary of State

07-26-1999 90007 043 ***558.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/20/1996

4. FEI Number

06-1313406

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. ☐ Yes ☒ No

2. Principal Place of Business
218 RT 17 NORTH
ROCHELLE PARK, NJ 07662

2a. Mailing Address 218 RT 17 N
ROCHELLE PARK NJ 07662

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
ROCHELLE PARK NJ

City & State
ROCHELLE PARK NJ

Zip
07662

Country
USA

Zip
07662

Country
USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MUNROE, W. BRADLEY
239 E. VIRGINIA STREET
TALLAHASSEE FL 32301**

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 **DCP** ☐ DELETE
NAME **LAMPARILLO, PAUL JR**
STREET ADDRESS **RD #1, DAY RD**
CITY-ST-ZIP **CAMPBELL HALL NY 10916**

TITLE **D** ☐ DELETE
NAME **LAMPARILLO, MICHAEL A JR**
STREET ADDRESS **571 MOUNTAIN AVE**
CITY-ST-ZIP **WASHINGTON TOWNSHIPS NJ 07882**

TITLE **V** ☐ DELETE
NAME **LAMPARILLO, THOMAS A JR**
STREET ADDRESS **75 UNION ST**
CITY-ST-ZIP **HOCKENSACK NJ**

TITLE **D** ☐ DELETE
NAME **LAMPARILLO, THOMAS A JR**
STREET ADDRESS **75 UNION ST**
CITY-ST-ZIP **HACKENSACK NJ 07601**

TITLE **VP** ☒ DELETE
NAME **PELLI, ROSINA**
STREET ADDRESS **7 STAAL LANE**
CITY-ST-ZIP **LODI NJ**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **GLENN J. WALLACE** ☒ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS **60 VILLAGE DR**
1.4 CITY-ST-ZIP **MONTVILLE, NJ 07045**

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

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

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

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

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

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/99

201-527-3349

Daytime Phone #

CR2E034 (5/99)