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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F96000006585 (1)

WILSHIRE FUNDING CORPORATION

Country

25

Thropart accord countries						
1776 SW MADISON ST., STE. 300						
PORTLAND OR 97205						

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc

City & State

21

22

23

24

Zip

Mailing Address

26. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

29

1776 SW MADISON ST., STE. 300 PORTLAND OR 97205

## **FILED** May 13 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Yes\_

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□ No

Not Applicable

3. Date Incorporated or Qualified 12/17/1996

93-1226007

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

Trust Fund Contribution

4. FEI Number

	9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent				
CORPORATION SERVICE COMPANY		81	Name			
1201 HAYS STREET TALLAHASSEE FL 32301-2525			2 Street Address (P.O. Box Number is Not Acceptable)			
		83				
		84	City	FL 85 Zip Code		
11. Pursuant to the provisions of Soctions 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 regulatoric agent and title it applicable (NOTE Registered Agent signature required when reinstating)  DATE  DATE						
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CEOT DELETE	1.1 TITLE		Change Addition		
NAME	WIEDERHORN, ANDREW	1,2 NAME	i			
STREET ADDRESS	1776 SW MADISON ST., STE. 300	1.3 STREET	ADDRESS			
CITY-ST-ZIP	PORTLAND OR 97205	1.4 CITY - 5	1-ZIP			
TITLE	P DELETE	2.1 TITLE		Change Addition		
NAME	MENDELSOHN, LAWRENCE	2.2 NAME				
STREET ADDRESS	1776 SW MADISON ST., STE. 300	2.3 STREET	ADDRESS			
CITY-ST-ZIP	PORTLAND OR 97205	2. 4 CITY - 1	ST - ZIP			
TITLE	V DELETE	3.1 TITLE		Change Addition		
NAME	KEPP, KENNETH	3.2 NAME				
STREET ADDRESS	1776 SW MADISON ST., STE. 300	3.3 STREET	ADDRESS			
CITY-ST-ZIP	PORTLAND OR 97205	3.4. CITY-ST-ZIP				
TITLE	V DELETE	4 1 TITLE		☐ Change ☐ Addition		
NAME	BERCHTOLD, DONALD	4. 2 NAME				
STREET ADDRESS	1776 SW MADISON ST., STE. 300	4.3 STREET	ADDRESS			
CITY-ST-ZIP	PORTLAND OR 97205	4.4 CITY - S	1-ZIP			
TITLE	<b>V</b> □ DÉLETE	5.1 TITLE		☐ Change ☐ Addition		
NAME	TASSOS, CHRIS	5.2 NAME				
STREET ADDRESS	1776 SW MADISON ST., STE. 300	5 3 STREET	ADDRESS	į		
CITY - ST - ZIP	PORTLAND OR 97205	5.4 City-S	T-ZiP			
TITLE	V DELETE	6.1 TITLE		☐ Change ☐ Addition		
NAME	VINCENT, PHILLIP	6.2 NAME				
STREET ADDRESS	1776 SW MADISON ST., STE. 300	63 STREET	ADDRESS	ļ		
CITY-ST-ZIP	PORTLAND OR 97205	6.4 CITY-S				
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. Turther certify that the information indicated on this 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: Dully fines PHILED VELDENT \$/20/58 503-229-5200						

Country