### **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

#### DOCUMENT # F97000000783

1. Entity Name

MEDALLION FUNDING CORP.



Principal Place of Business

Mailing Address

**437 MADISON AVENUE** 38TH FLOOR

**437 MADISON AVENUE** 38TH FLOOR

NEW YORK, NY 10022

NEW YORK, NY 10022

# FILED May 02, 2008 08:00 AN Secretary of State



## DO NOT WRITE IN THIS SPACE

04072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 11-2523716

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301

# DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when relinstating)  DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign     Trust Fund Contribution		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOC MURSTEIN, ALVIN 437 MADISON AVENUE, 38TH FLOOI NEW YORK, NY 10022	R			U00000942749 05/29/08-80030-016 150.00
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P KOWALSKY, MICHAEL J 437 MADISON AVENUE, 38TH FLOO NEW YORK, NY 10022	R			00, 20, 00 00000 010 100.00
NAME STREET ADDRESS CITY-ST-ZIP	VS RUSSO, MARIE 437 MADISON AVENUE, 38TH FLOOR NEW YORK, NY 10022  D MURSTEIN, ANDREW M 437 MADISON AVENUE, 38TH FLOOR NEW YORK, NY 10022			DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KREITMAN, STANLEY 437 MADISON AVENUE, 38TH FLOOI NEW YORK, NY 10022	R			
TITLE NAME STREET ADDRESS	D RUDNICK, DAVID L 437 MADISON AVENUE, 38TH FLOOI	R			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the feceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: A

CITY-ST-ZIP

NEW YORK, NY 10022

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR