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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

Block 12 or Block 13 if char



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000005869 (9)

GLOBAL FUNDING INCORPORATED

Principal Place of Business Mailing Address 101 S. PALMETTO SUITE 5 101 S. PALMETTO SUITE 5 DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/06/1997 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 56-1972307 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. Yes No Country Zip Country Zip Yes 24 25 29 30 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHRÖEDER, WILLIAM S JR 101 S. PALMETTO SUITE 5 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32114 83 Zip Code Ad 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ons of, Section 607, 0505, Florida Statutes. 11. Pursuant to the prov office or registered agent. I am familiar SIGNATURE (NOTE: Registered Agent signature required when reinstating) nd title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition 1.1 TITLE Change TITLE HINSDALE, JAMES G JR NAME 1.2 NAME 1630 PROVIDENCE DRIVE STREET ADDRESS 1.3 STREET ADDRESS CHARLOTTE NC 28211 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 THILE O'BRIEN, KEVIN M NAME 22 NAME 3417 CATSKILL DRIVE STREET ADDRESS 2.3 STREET ADDRESS MATTHEWS NC 28105 CITY-ST-ZIP 2 4 CITY-ST-ZIP SD DELETE Change ■ Addition 3 1 1HLE TITLE **ASHCROFT, JAMES M** NAME 3.2 NAME 725 STRATFORDSHIRE DRIVE STREET ADDRESS 3.3 STREET ADDRESS MATTHEWS NC 28105 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE GILLIS, MARY B 4. 2 NAME NAME 140 RUNNYMEDE STREET ADDRESS 4.3 STREET ADDRESS **BLYTHEWOOD SC 29016** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME **53 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

DELETE

6.1 TITLE 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 13 if the proof of the corporation of

FILED May 01 1998 8:00am Secretary of State

Change

Addition

704-

