## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000003388

Title:

Name:

Address: City-St-Zip:

## FILED Apr 29, 2004 Secretary of State

Entity Name: PACIFIC SHORE FUNDING INC. **Current Principal Place of Business: New Principal Place of Business:** 85 ENTERPRISE 23046 AVENIDA DE LA CARLOTA SUITE 656 SUITE 200 ALISO VIEJO, CA 92656 LAGUNA HILLS, CA 92653 **Current Mailing Address: New Mailing Address:** 85 ENTERPRISE 23046 AVENIDA DE LA CARLOTA SUITE 200 SUITE 656 ALISO VIEJO, CA 92656 LAGUNA HILLS, CA 92653 FEI Number: 33-0352433 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: SECR (X) Change ( ) Addition WOLFE, TERRY Name: Name: WOLFE, TERRY 22391 BAYBERRY 22391 BAYBERRY Address: Address: City-St-Zip: MISSION VIEJO, CA 92692 City-St-Zip: MISSION VIEJO, CA 92692 **EVPF** Title: Title: () Delete () Change () Addition Name: KO, LI-LIN Name: 16 BELLA ROSA Address: Address: IRVINE, CA 92620 City-St-Zip: City-St-Zip: Title: Title: PCOB ( ) Delete () Change () Addition EATON, EDWARD F Name: Name: 626 A CLUBHOUSE DRIVE Address: Address: City-St-Zip: NEWPORT BEACH, CA 92336 City-St-Zip: Title: **TCFO** ( ) Delete Title: () Change () Addition CAUGHMAN, DOREEN R Name: Name: Address: 1302 CALLE ALCAZAR Address: City-St-Zip: SAN CLEMENTE, CA 92672 City-St-Zip:

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

Title:

Name:

Address:

City-St-Zip:

SIGNATURE:	DOREEN CAUGHMAN	CFO	04/29/2004

() Delete

GROE, ROBIN

14 BIG DIPPER COURT

NEWPORT BEACH, CA 92663

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