

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006267

FILED
Feb 08, 2005
Secretary of State

Entity Name: SFC FUNDING COMPANY OF FLORIDA

Current Principal Place of Business:

335 CROSSWAYS PARK DR.
WOODBURY, NY 11797 US

New Principal Place of Business:

Current Mailing Address:

335 CROSSWAYS PARK DR.
PO BOX 9011
SYOSSET, NY 11791 US

New Mailing Address:

FEI Number: 11-2523559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: MANGIA, ANGELO J
Address: 36 COOLIDGE AVENUE.
City-St-Zip: GL;EN HEAD, NY 11545 US

Title: SEC () Delete
Name: MAXWELL, JAMES S
Address: 470 WEST END AVENUE
City-St-Zip: NEW YORK, NY 10024 US

Title: SVP () Delete
Name: NORI, ROBERT J
Address: 621 STEWART AVE.
City-St-Zip: NEW HYDE PARK, NY 11040 US

Title: D () Delete
Name: O'BRIEN, THOMAS M
Address: 457 MILDRED PLACE
City-St-Zip: ORADELL, NJ 07649 US

Title: D () Delete
Name: TOLOMER, ROBERT J
Address: 51 FOREST AVE. #97
City-St-Zip: OLD GREENWICH, CT 06870 US

Title: D () Delete
Name: HICKOK, RAYMOND C
Address: 187 MONROE AVE.
City-St-Zip: BELLE MEAD, NJ 08502 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
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Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: ROBERT J. NORI

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02/08/2005

Electronic Signature of Signing Officer or Director

Date