## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000006267

Entity Name: SFC FUNDING COMPANY OF FLORIDA

FILED Jan 28, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
335 CROSSWAYS PARK DR. WOODBURY, NY 11797 US					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
335 CROSSWAYS PARK DR. PO BOX 9011 SYOSSET, NY 11791 US					
FEI Number:			El Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent 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:					
	Electroni	c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) MANGIA, ANGEL 335 CROSSWA' WOODBURY, N	YS PARK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WANN, ROBERT 615 MERRICK A		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () GOTTESFELD, A 355 CROSSWYS WOODBURY, N	S PARK DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	QUINN, R. PATR 615 MERRICK A		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TOLOMER, ROE	THE AMERICAS	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CANGEMI, THOM 615 MERRICK A		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ALAN GOTTESFELD T 01/28/2008