2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2004
Secretary of State

DOCUMENT# F98000006413

Entity Name: SR FUNDING CORPORATION

Current Principal Place of Business:

8659 BAYPINE RD
SUITE 300
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8659 BAYPINE RD
SUITE 300
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3535591 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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: CEO ( ) Delete
Name: KLINGER, GARY
Address: 8659 BAYPINE RD SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: VPS ( ) Delete
Name: SCHLEITER, ROBERT JR
Address: 8659 BAYPINE RD SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: VPC ( ) Delete
Name: MILLER, DAWNA
Address: 8659 BAYPINE RD SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP ( ) Delete
Name: COOK, MARK
Address: 8659 BAYPINE RD SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP ( ) Delete
Name: SCARBROUGH, STEVEN
Address: 7301 BAYMEADOW WAY
City-St-Zip: JACKSONVILLE, FL 32256

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
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: MIXON, MARGARITA
Address: 8659 BAYPINE RD SUITE 300
City-St-Zip: JACKSONVILLE, FL 32256

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 F. SCHLEITER, JR. VP 01/16/2004

Electronic Signature of Signing Officer or Director — Date