## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# G19744

Apr 30, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Entity Name: FORTUNE FUNDING CORPORATION OF AMERICA

**Current Principal Place of Business: New Principal Place of Business:** 

434 VITTORIO AVE. 430 VITTORIO AVE.

CORAL GABLES, FL 331469842 CORAL GABLES, FL 33146

**Current Mailing Address: New Mailing Address:** 

434 VITTORIO AVE 430 VITTORIO AVE

CORAL GABLES, FL 331469842 CORAL GABLES, FL 33146

FEI Number: 59-2247325 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:

PATTY, CARL PATTY, MICHAEL C 434 VITTORIO 430 VITTORIO AVE

CORAL GABLES, FL 33146 CORAL GABLES, FL 33146 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: MICHAEL C. PATTY 04/30/2003

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

() Delete Title: (X) Change ( ) Addition

Title: PATTY, CARL PATTY, MICHAEL C Name: Name: 434 VITTORIO AVENUE 430 VITTORIO AVENUE Address: Address: City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL 33146 US

STD Title: (X) Change ( ) Addition Title: () Delete

PATTY, LINDA C. Name: Name: KELLERMAN, DAVID P 434 VITTORIO AVE 430 VITTORIO AVE. Address: Address:

CORAL GABLES, FL 00000, CORAL GABLES, FL 33146 US City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition FERNANDEZ, PETER R FERNANDEZ, PETER R Name: Name:

434 VITTORIO AVE 430 VITTORIO AVE Address: Address:

City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL 33146 US

Title: (X) Delete Title: () Change () Addition

PATTY, MICHAE., Name: Name: Address: 430 VITTORIO AVE. Address: City-St-Zip: CORAL GABLES, FL 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.

Ρ SIGNATURE: MICHAEL C. PATTY 04/30/2003