2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L28964

Name:

Address:

City-St-Zip:

FUNKE, MICHELLE

8391 150TH COURT NORTH

PALM BEACH GARDENS, FL 33418

Entity Name: FRANK T. FUNKE III ASSOCIATES INC.

FILED Mar 31, 2009 Secretary of State

| Current P | rincipal Plac | e of Business: | New Principal Place | New Principal Place of Business: | |
|--|-----------------------------|--|---|---|--|
| 8391 150TH CT NORTH WEST PALM BEACH, FL 33418 | | | | 8391 150TH CT NORTH PALM BEACH GARDENS, FL 33418 | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| P.O. BOX: JUPITER, | | | P.O. BOX 240 JUPITER, FL 33458 | | |
| FEI Number: | : 65-0161367 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | Address of | Current Registered Agent: | Name and Address | Name and Address of New Registered Agent: | |
| The above | of Florida. | | purpose of changing its registere | ed office or registered agent, or both, | |
| | Electro | nic Signature of Registered Aç | gent | Date | |
| Election Car | npaign Financir | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | FUNKE, FRAN 8391 150TH C | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DIAMOND, ST 5659 GOLDEN |) Delete EVE I EAGLE CIRCLE GARDENS, FL 33418 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: | S (|) Delete | Title: | () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: FRANK T FUNKE III P 03/31/2009