

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 13 AM 8:13

DOCUMENT # L65076 (6)
1. Corporation Name
METRO HOME FUNDING CORP.

Principal Place of Business Mailing Address
1715 E SUNRISE BLVD P.O. BOX 4239
FT LAUDERDALE FL 33304 FT LAUDERDALE FL 33338
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/13/1990 3a. Date of Last Report 05/01/1994
4. FEI Number 65-0278257 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under S. 199.002, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 131-63 South Palmetto Dr. 25 P.O. Box 372190
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 Satellite Beach 28 Satellite Beach FL
24 32937 25 U.S.A. 29 32937 30 U.S.A.

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
PALUMBO, THOMAS J. 81 Name
1715 E SUNRISE BLVD 82 Street Address (P.O. Box Number is Not Acceptable)
FT LAUDERDALE FL 33304 83
84 City Satellite Beach FL 85 Zip Code 32937

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Applicable: Typed or printed name of registered agent and the corporation)

(NOTE: Registered Agent signature required when re-registering)

(DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☒ Change ☐ Addition
NAME	PALUMBO, THOMAS J.	1.2 NAME	
STREET ADDRESS	101 BAY COLONY DR	1.3 STREET ADDRESS	529 Turtle Circle
CITY, ST, ZIP	FT LAUDERDALE FL	1.4 CITY, ST, ZIP	Satellite Beach FL 32937
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY, ST, ZIP		2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Thomas J. Palumbo 6/6/95 407-77-3500
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR Date Daytime Phone #