2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000003356

Entity Name: SUNBRIDGE FUNDING COMPANY, LLC

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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6300 NALL AVENUE, SUITE 200 MISSION, KS 66202

Current Mailing Address: New Mailing Address:

6300 NALL AVENUE, SUITE 200 4350 SHAWNEE MISSION PKWY MISSION, KS 66202 FAIRWAY, KS 66205

FEI Number: 20-3665721 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:

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

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

 Name:
 ELLIS, MICHAEL J
 Name:
 SUNBRIDGE CAPITAL, I, NC.

 Address:
 6300 NALL AVENUE, SUITE 200
 Address:
 6300 NALL AVENUE, SUITE 200

 City-St-Zip:
 MISSION, KS 66202
 MISSION, KS 66202

Title: MGR () Delete Title: MGRM (X) Change () Addition Name: MOSKOWITZ, DOUGLAS E Name: WEBER, ADRIAN

Address: 6300 NALL AVENUE, SUITE 200 Address: 4350 SHAWNEE MISSION PKWY.

City-St-Zip: MISSION, KS 66202 City-St-Zip: FAIRWAY, KS 66205

Title: MGR () Delete Title: MGRM (X) Change () Addition Name: WEBER, ADRIAN Name: MCLAURY, CAROL

Address: 6300 NALL AVENUE, SUITE 200 Address: 4350 SHAWNEE MISSION PKWY.

City-St-Zip: MISSION, KS 66202 City-St-Zip: FAIRWAY, KS 66205

Title: () Delete Title: MGRM () Change (X) Addition Name: MEEGAN, CRAIG

Address: Address: 4350 SHAWNEE MISSION PKWY

City-St-Zip: City-St-Zip: FAIRWAY, KS 66205

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CRAIG MEEGAN CFO 04/28/2008