2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007
Secretary of State

DOCUMENT# P03000039304

Entity Name: SIGNATURE HOME FUNDING CORPORATION

Current Principal Place of Business:

701 N. HERCULES AVE
SUITE D
CLEARWATER, FL 33765

New Principal Place of Business:

509 VIRGINIA LN.
CLEARWATER, FL 33764

Current Mailing Address:

701 N. HERCULES AVE
SUITE D
CLEARWATER, FL 33765 US

New Mailing Address:

509 VIRGINIA LN.
CLEARWATER, FL 33764 US

FEI Number: 56-2342780 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BYRNES, TRACY L
701 N. HERCULES AVE
SUITE D
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

BYRNES, TRACY L
509 VIRGINIA LN.
CLEARWATER, FL 33764 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: _____ 05/14/2007
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BYRNES, TRACY L
Address: 701 N. HERCULES AVE
City-St-Zip: CLEARWATER, FL 33765

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BYRNES, TRACY L
Address: 509 VIRGINIA LN.
City-St-Zip: CLEARWATER, FL 33764

Title: V ( ) Change (X) Addition
Name: BYRNES, THOMAS L
Address: 509 VIRGINIA LN.
City-St-Zip: CLEARWATER, FL 33764

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.

SIGNATURE: THOMAS BYRNES V 05/14/2007
Electronic Signature of Signing Officer or Director — Date