


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90077 045 ***150.00

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|--|--|---|--|---|--|
| DOCUMENT # P03000044099 1. Entity Name ADVANTAGE PREMIUM FUNDING, INC. | | | |  | |
| Principal Place of Business 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | | | Mailing Address 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | | |
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country | | 3. Mailing Address Suite, Apt. #, etc. City & State Zip Country | | | |
| 4. FEI Number 58-2667178 | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent JONES, MATTHEW T ESQ 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D MORGAMAN, PHILIP E 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | CEO/CFO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D STEPHENSON, MARK 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | CFO/DO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D MORGAMAN, JUSTIN 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D SPRUCE, WILLIAM 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | CFOV GARDNER, DEBORAH S 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | DO/SUP/CFO/IT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D NICHOLS, NEAL 3000 W CYPRESS CREEK RD FT LAUDERDALE, FL 33309 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: James E. Roberts James Roberts 3/1 6/07 954 493 6565 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # | | | | | |

ATTACHMENT 40075580

#P03000044899

ADVANTAGE PREMIUM FUNDING, INC.
ADDITIONAL DIRECTORS AND OFFICERS:

Title: P
Name: James E. Roberts
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V,S
Name: Matthew T. Jones
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: SVP
Name: Joseph A. Matteis
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: D
Name: Charlie King
Street Address: 3251 Washington Blvd.
City-St-Zip: Arlington, VA 22201

Title: V
Name: Marilyn Peterson
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V
Name: Norm Baker
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: SVP
Name: Chris Parkinson
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V
Name: Dawn Duxbury
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V
Name: Brittany Rodgers
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

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Title: V
Name: Chris Lovisone
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V
Name: Nicole Boodram
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V
Name: John Pecoraro
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309

Title: V
Name: Susan M. Plochoki
Street Address: 3000 W. Cypress Creek Rd.
City-St-Zip: Ft. Lauderdale, Florida 33309