2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P05000127115

1. Entity Name

BUTLER FUNDING, INC.



FILED Jan 14, 2008 08:00 A Secretary of State

Principal Place of Business

3185 S. CONWAY RD. ORLANDO, FL 32812 Mailing Address

3185 S. CONWAY RD. ORLANDO, FL 32812



01072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3706681

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUTLER, C. VICTOR JR. 3185 S. CONWAY RD.

TITLE NAME STREET ADDRESS

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP TITLE

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ORLANDO, FL 32812			IN THIS SPACE						
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_	Signature, typed or printed name of registered agent and title	fapplicable (NOTE Register	red Agent signature required when rei	gent signature required when reinstering) DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution			U00000780899 01/15/08-80013-01	4 150 0			
10.	OFFICERS AND DIREC	TORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUTLER, C. VICTOR JR: 3185 S. CONWAY RD. ORLANDO, FL 32812								
NAME STREET ADDRESS CITY-ST-ZIP	VP WEST, BETTY 3185 S. CONWAY RD. ORLANDO, FL 32812				•				

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12. Thereby 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 addrigss, with all other like empowered.

			/ 1
SIGNATURE SHIFT (VICTOR SU	THER JR.	1/1/08 (401/381-520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Prione ≠