FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P25907** **(7)**

1. Corporation Name

COVINGTON FUNDING COMPANY, INC.

Principal Place of Business	Mailing Address
2875 NE 191ST ST., #402 NORTH MIAMI BEACH FL 33180	2875 NE 191ST ST., #402 NORTH MIAMI BEACH FL 33180

3. Date Incorporated or Qualified: **09/05/1989**
3a. Date of Last Report: **04/25/1995**

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / Country — 30

4. FEI Number: **13-1996125** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CAHAN, RICHARD J. ALAN, ESQ
~~SCHANTZ, SCHATZMAN & AARONSON, P.A.~~
SOUTHEAST FINANCIAL CENTER, STE. 3650
MIAMI FL 33131-2394

10. Name and Address of New Registered Agent

81 Name: c/o BECKER & POLIAKOFF
82 Street Address (P.O. Box Number is Not Acceptable):
83 5101 BLUE LAGOON DR., STE. 100
84 City: MIAMI FL 85 Zip Code: 33126

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: Richard Cahan 5/28/96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CTD	☐ DELETE	11 TITLE		☒ Change ☐ Addition
NAME	GITTLIN, P. MORTON		12 NAME		
STREET ADDRESS	10155 COLLINS AVE.		13 STREET ADDRESS	2875 N.E. 191ST STREET	
CITY-ST-ZIP	BAL HARBOUR FL		14 CITY-ST-ZIP	NO. MIAMI BEACH, FL 33180	
TITLE	PSD	☐ DELETE	21 TITLE		☒ Change ☐ Addition
NAME	GITTLIN, A. SAM		22 NAME		
STREET ADDRESS	9801 COLLINS AVE		23 STREET ADDRESS	2875 N.E. 191ST STREET	
CITY-ST-ZIP	BAL HARBOUR FL		24 CITY-ST-ZIP	NO. MIAMI BEACH, FL 33180	
TITLE	VDS	☐ DELETE	31 TITLE		☒ Change ☐ Addition
NAME	GITTLIN, DAVID B.		32 NAME		
STREET ADDRESS	20191 E. COUNTRY CLUB DR		33 STREET ADDRESS	2875 N.E. 191ST STREET	
CITY-ST-ZIP	NO. MIAMI BEACH FL		34 CITY-ST-ZIP	NO. MIAMI BEACH, FL 33180	
TITLE	VTD	☐ DELETE	41 TITLE		☒ Change ☐ Addition
NAME	GITTLIN, BRUCE D.		42 NAME		
STREET ADDRESS	178 GREAT HILLS DR.		43 STREET ADDRESS	70 S. ORANGE AVE., STE 125	
CITY-ST-ZIP	SOUTH ORANGE NJ		44 CITY-ST-ZIP	LIVINGSTON NJ 07039	
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS	400001856314	
CITY-ST-ZIP			54 CITY-ST-ZIP	-06/10/96--01001--012	
TITLE		☐ DELETE	61 TITLE	***225.00	☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

06-07-96 OK

CR2E034 (12/95)

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)(i), 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: Bruce D. Gittlin (Bruce D. GITTLIN) 5/13/96 (305)995-3400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number