

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 13 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P93000018951 (2)

1. Corporation Name  
CFI GENERAL FUNDING, INC.



Principal Place of Business

Mailing Address

5601 WINDHOVER DRIVE  
ORLANDO FL 32819  
US

5601 WINDHOVER DRIVE  
ORLANDO FL 32819  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

3. Date Incorporated or Qualified

03/12/1993

4. FEI Number

59-3175660

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAINEY, R A  
741 LAKE CATHERINE DRIVE  
MAITLAND FL 32751

81 Name

MARDER, MICHAEL

82 Street Address (P.O. Box Number is Not Acceptable)

135 WEST CENTRAL BOULEVARD

83

SUITE 1100

84 City

ORLANDO, FL

85 Zip Code

32801

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

Signature typed or printed name of registered agent and last of applicable

(NOTE: Registered Agent signature required when reinstating)

4/27/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME SIEGEL, DAVID A  
STREET ADDRESS 5601 WINDHOVER DRIVE  
CITY-ST-ZIP ORLANDO FL 32819

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D ☒ DELETE  
NAME SIEGEL, BETTIE I  
STREET ADDRESS 5601 WINDHOVER DRIVE  
CITY-ST-ZIP ORLANDO FL 32819

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME DUGAN, THOMAS F  
2.3 STREET ADDRESS 5601 WINDHOVER DRIVE  
2.4 CITY-ST-ZIP ORLANDO, FL 32819

TITLE D ☒ DELETE  
NAME LEVENTHAL, RONALD H  
STREET ADDRESS 5601 WINDHOVER DRIVE  
CITY-ST-ZIP ORLANDO FL 32819

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME D  
3.3 STREET ADDRESS WALTRIP, MARK A  
3.4 CITY-ST-ZIP 5601 WINDHOVER DRIVE  
ORLANDO, FL 32819

TITLE D ☐ DELETE  
NAME MILLER, WILLIAM E II  
STREET ADDRESS RT 1, BOX 1190  
CITY-ST-ZIP BERRYVILLE VA 22611

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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

4/27/98 (110)961-3250 CFI/11

CR2E034 (10/97)