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 #	P93000088314	(8)
1 Comoration Name		

Corporation Name.

COMP	ETITIVE FUNDING, INC.								
Principal Place	of Business	Mailing Address				i iamilant sin inita litin main main			1 6(\$11 \$1\$1 1881
3701 S OSP SARASOTA		3701 S OSPREY AVE SARASOTA FL 34239							
					3. Date Incorporated or Qualified 12/20/1993 3a. Date of Last Report 04/03/1995				
2. Principal Pla	ace of Business	2a. Mailing Address				4. FET Number 65-0463604		<u> </u>	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State	}	City & State				Election Campaign Financing Trust Fund Contribution			May Be I to Fees
Zip	Country 25	Z _I p	Coun	try		This corporation has liability for in Florida Statutes	intangible ta □ No	x under s	199.032,
J	9. Name and Address of Curre	and the second contract of the	[· · · · ·		10. Name and Address of New R	egistered .	Agent	
			18	B1	Name				
HANKIN, LAWRENCE M 2033 MAIN ST			ļ	82	Street Ad	idress (P.O. Box Number is Not Acceptab	le)		
SUITE			Ī	83					
SARAS	OTA FL 34237		i	84	City	The second section is a second	FI	85 Zự	o Code
11. Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida Statu	tes, the abov	e n	amed corp	ocration submits this statement for the pur pard of directors. Thereby accept the app	pose of cha	nging its r	egistered offic
or register familiar wi	red agent, or boin, in the State of Flor ith, and accept the obligations of, Sec	stion 607.0505, Florida Statule	zea ny me co s.	JITJ. H.	ration's oc	oard of directors. Thereby accept the app	JIRTHE IL 65	registered	agent. Fam
SIGNATURE	Signature, typed or printed har is of registered ago:	nd hairean ann an 1966	iore in	Saw I	elevent on reins	irkad whon reinstatings	DATE		
12.		ND DIRECTORS	13.		agrano e requ	ADDITIONS/CHANGES TO OFF		DIRECTO	IRS IN 12
TILE	P	DELETE	1 111	LF		V P		Change	Addition
NAME	ECKEL, DAVID C		1.2 NAJ	ME					
STREET ADDRESS	490 TONAWANDA RD		1.3 S) F	REEL	ADDRESS				
HTY-SY-ZIP	AMHERST NY		1.4 C(I	Y - 51	1-7IP				
tî L F	↑ VP	[] DELETE	2 1 7 17	TLE		P	Ę	Change Change	Add tion
IAME	HERMAN, F D		2 2 NA!	ΜĘ					
STREET ADDRESS	4705 ELDERBERRY DR		2 3 811	HLE I	ADDRESS				
ITY-ST-ZIP	SARASOTA FL		2 4 CIÎ		r . 719				
ITLE	ST COUNTY DODGET	[]] DELETE	3 1 III				l	Change	Addition
NAME	COWLES, ROBERT C		3 2 NA						
STREET ADDRESS	4092 SOUTHWELL WAY SARASOTA FL				ADDRESS				
CITY-S1-ZIP	SANASOIA FL	[] DELETE	3 4 CIT		1-ZIF			Change	Addition
DILE		[] betch	4.1 NA				,		
NAME					ADDRESS				
STREET ADDRESS			4.4 Cil						
CITY-ST-ZIP		DELETE	5 1 Ti		1.11			Change	Addition
NAME		Name of	5.2 NA						
STREET ANDRESS			5381	REE 1	ADDRESS				
CITY-ST-ZIP			5 4 CI						
TITLE		[]] Datene	6 1 1	11.6	1			Change	Addition
NAME		,	6.2 NA	M:					
STREET ADDRESS	1	.1	6381	RE11	ADDRESS				
CITY-ST-ZIP	1/_/	//	64 CI						
certify that oath, that	by certify that the information supplied at the information indicated by the ali t Lam an officer or director of the own in Block 12 or Block 13 if playing, p	intial report or supplemental ar varation of his regulacy in trus	anual remod is	c tri	ic and acci	fy for the exemption stated in Section 115 urate and that my signature shall have the this report as required by Chapter 607, f	e same lega	l effect as i	if made under

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR