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PROFIT CORPORATION ANNUAL REPORT

1997

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 06 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400009389 (5)

FUNDING MANAGEMENT CORPORATION

Principal Place of Business Mailing Address 3908 26TH STREET WEST 3908 26TH STREET WEST BRADENTON FL 34205-3510 BRADENTON FL 34205 3. Date Incorporated or Qualified 3a. Date of Last Report 01/28/1994 02/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 05-0468X oplied For NOKARPK 21 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc \$8.75 Additional DX. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FELDMAN, MARC H 3908 26TH STREET WEST Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34205** 83 84 City Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typisclipriprinted name of registered agent and title II applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition PSTD DELETE Change TITLE 1.1 TITLE FELDMAN, MARC H NAME 1.2 NAME 3908 26TH STREET WEST STREET ADDRESS 1.3 STREET ADDRESS **BRADENTON FL 34205** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST- ZIP DELETE Addition TITLE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Ido 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 typication or the receiper or trusted amounted to execute this report as required by Chapter 607, Florida Statutes; and that my name