

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000010261 (3)

1. Corporation Name
DIMENSIONS ONE FUNDING, INC.

Principal Place of Business
2121 CORPORATE SQUARE BLVD
SUITE 254
JACKSONVILLE FL 32216
US

Mailing Address
2121 CORPORATE SQUARE BLVD
SUITE 254
JACKSONVILLE FL 32216
US

FILED
Jul 29 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/01/1994

4. FEI Number

65-0477713

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 owes or has paid the current year Intangible
Personal Property Tax due June 30, ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CARNEY, HARRIETTE
2121 CORPORATE SQUARE BLVD
SUITE 254
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name CARNEY HARRIETTE
82 Street Address (P.O. Box Number is Not Acceptable)
11809 Catraker Drive
83
84 City Jacksonville FL 85 Zip Code 32223

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 *Harriette Carney* Harriette Carney 7-14-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	CARNEY, HARRIETTE	
STREET ADDRESS	12855 SW 110 TERR	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	CARNEY, PATRICK	
STREET ADDRESS	12855 SW 110 TERR	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	CARNEY HARRIETTE	
1.3 STREET ADDRESS	11809 Catraker Dr	
1.4 CITY-ST-ZIP	Jacksonville FL 32223	
2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	CARNEY PATRICK	
2.3 STREET ADDRESS	11809 Catraker Dr	
2.4 CITY-ST-ZIP	Jacksonville, FL 32223	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Harriette Carney

7-14-98 904-732-8140

CR2E034 (5/98)

7/14/98

Handwritten initials

Florida Department of State
Sandra B. Mortham, Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re:

Dimensions One, Inc. 59-2135764
Dimensions One Funding, Inc. 65-0477713

Dear Ms. Mortham,

Attached please find the annual reports on the two above referenced corporations. Be aware that we moved and NEVER RECEIVED the original notice to file. The first notice we received was 2 days ago and it is marked "2nd Notice" and carried a very large fine.

If I read it correctly the "on time" payment was \$150.00 but the "late" payment is now \$550.00 for each corporation.

At this time I am sending the completed annual report forms and a check in the amount of **\$150.00** each and respectfully request that they be accepted as we never got the first notice. I have enclosed the cover sheet stating "2nd notice" as well as the back cover showing that the documents were forwarded to our new address...something that apparently did not take place on the first notice.

Had we received the first notice we would have sent it in on time however we did not. Please consider this and accept the attached payment. If you have any problems or questions we can be reached at (904) 732-8140 or (904) 260-8988.

Respectfully,

Handwritten signature of Harriette Carney
Harriette Carney

Sec.-Treas / Dimensions One, Inc.
President / Dimensions One Funding, Inc.