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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Oct 08 1998 8:00am

Secretary of State

Change

Change

Addition

Addition

Secretary of State **DIVISION OF CORPORATIONS**

DÓCUMENT # P94000059169

Liberty Financial Real Estate Funding Corp. Principal Place of Business Mailing Address same 2629 McCormick Drive Suite 102 DO NOT WRITE IN THIS SPACE Clearwater, FL 33759 3. Date Incorporated or Qualified 4. FEI Number 59 - 3262957 2. Principal Place of Business 2a. Mailing Address Applied For 2629 McCormick Drive Not Applicable 21 26 Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired #102 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Clearwater 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 33759 Yes 25 Personal Property Tax due June 30. Ø No USA 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Jarrell Britts 82 Street Address (P.O. Box Number is Not Acceptable) 2629 McCormick Drive, #102 83 Clearwater, FL 33759 84 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 agont, 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 agont, a milliar with, and accept the efficiency of 0505, Florida Statutes.

SIGNATURE

JAMELL BRITTS

RESIDENT

10-2-98 Signalum hysyld or printed name of registered agent and little if applicable (HOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change Addition DELETE Tate F 1.1 TITLE Director, President NAME 1.2 NAME Jarrell Britts STREET ADDRESS 2629 Mccornick Drive, 1.3 STREET ADDRESS CITY - ST - ZIP 1.4 CHY-\$1-ZIP CLEARNATER, FL 33759 DELETE Change Addition TITLE 21 TIFLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2. 4 CITY-ST-ZIP Change Addition DELETE TITLE 3.1 TITLE 300002659223 NAME 32 NAME -10/08/98--01058-**-0**44 STREET ADDRESS 3.3 STREET ADORESS ***550.00 CITY - S1 - ZIP 3.4. CITY - \$1 - 2IP TITLE DELETE 4.1 TITLE Change Addition HALLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - \$1 - ZIP 4.4 CITY - ST - 21P

64 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not quality 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 fam 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 attachingm/with an address.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

53 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

DELETE

DELETE

TITLE

1/ALAF

TITLE

HAME

STREET ADDRESS

STREET ADDRESS

CITY - \$1 - ZIP

- Date: 10/2/98