SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED; MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 JUL -5 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000087136 (5)

1. Corporation Name
MEDFORD FINANCE CORP.

Principal Place of Business
600 LOOKOUT ALLEY
CAPE HAZE FL 33946

Mailing Address
600 LOOKOUT ALLEY
CAPE HAZE FL 33946

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/01/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21	26 El Retiro Lane
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 IRvington, N.Y.
24 / 25	29 10533 / 30 USA

4. FEI Number: 65-0542201-[illegible] — 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. [illegible] Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

GUNDERSON, MIKO P
% BATSEL MCKINLEY ITTERSAGEN GUNDERSON
1861 PLACIDA RD., SUITE 104
ENGLEWOOD FL 34223

10. Name and Address of New Registered Agent

81 Name: ARNOLD BRenhouse
82 Street Address (P.O. Box Number is Not Acceptable): 600 LookouT Alley
83
84 City: CApe HAze FL 85 Zip Code: 33946

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] 6/28/95

12. OFFICERS AND DIRECTORS

D
BRENHOUSE, ARNOLD
600 LOOKOUT ALLEY
CAPE HAZE FL 33946

13. ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: [signature] June 28/95 914-591-7800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ARNOLD A. BRenhouse

CR2E034 (3/95)

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