

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000031080

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** CAPITAL FUNDING & MANAGEMENT CORP.

**Current Principal Place of Business:**

28548 CHIANTI TERRACE  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

8951 BONITA BEACH ROAD  
SUITE 525, PMB 309  
BONITA SPRINGS, FL 34135 42

**New Mailing Address:**

**FEI Number:** 65-0577678

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOVATT, JEFF M ESQ.  
821FIFTH AVENUE SOUTH  
SUITE 201  
NAPLES, FL 34102 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPTS  
Name: PERKINS, JOHN H  
Address: 8951 BONITA BEACH ROAD, SUITE 525, PMB 309  
City-St-Zip: BONITA SPRINGS, FL 34135 42

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN H PERKINS

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02/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date