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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortha

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000043019 (5)

R & L FUNDING, INC.

Principal Place of Business

Mailing Address

FILED Apr 24 1998 8:00am Secretary of State



431 WEST OAK STREET KISSIMMEE FL 34741	431 WEST OAK STREET KISSIMMEE FL 34741		DO NOT WRITE IN THIS SPACE			
			 Date Incorporated or Qualified 06/02/1995 			
2. Principal Place of Business	2a. Mailing Address 26 514 Golfpack	Dr.	4. FEI Number 59-3358060	Applied For Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Gity & State	City & State 28 Celebration,	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 25		Country VSA	This corporation owes or has paid the cur Personal Property Tax due June 30.	rrent year Intangible X Yes No		
9. Name and Address of Curr	ent Registered Agent	10. Name and Address of New Registered Agent				
LETSON, WILLIAM 431 WEST OAK STREET KISSIMMEE FL 34741			Iress (P.O. Box Number is Not Acceptable)			
	1500 and 607 1500 Eloyida Statuton the	83 84 City	FL occation submits this statement for the purpose of	85 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, and accept the obligations of Section 607.0505. Florida Statutes.

* 7 *	egistered agent, or both, in the State of Florida. Such in familiar with, and accept the obligations of, Section	607.0505, Florid	la Statutes.	organist bound of anotonos, moreo, accept the a		
SIGNATURE .	Signature, typed or printed name of registered agent and little if applicable.	(NOTE: A	egistered Agent signature	required when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DS	DELETE	1.1 TITLE		Change	Addition
NAME	RALSTON, STEPHEN M		1.2 NAME			
STREET ADDRESS	1660 GRANDVIEW BLVD		1.3 STREET ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL		1.4 CITY - ST - ZIP			
TITLE	DP I	DELETE	2.1 TITLE		☐ Change	Addition
NAME	LETSON, WILLIAM		2.2 NAME			
STREET ADDRESS	431 WEST OAK STREET		2.3 STREET ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL		2 4 CITY - ST - ZIP			
TITLE	D	DELETE	31 TITLE		☐ Change	☐ Addition
NAME	STEELE, WILLIAM		3.2 NAME			
STREET ADDRESS	931 WEST OAK STREET		3 3 STREET ADDRESS	,		
CITY-ST-ZIP	KISSIMMEE FL 34741		3 4. CITY-ST-ZIP			
TITLE	DT	DELETE	4.1 TITLE		Change	Addition
NAME	HENNINGSEN, HARALD J		4. 2 NAME			
STREET ADDRESS	604 OAK COMMONS BLVD.		4.3 STREET ADDRESS			
CITY-ST-ZIP	KISSIMMEE FL		4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
OUTV OT 710			6.4 CITY, ST., 7/P			

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 organ attrictment with an address.

4/5/98 (407) EVE-1004