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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F 1. Corporation Name J.F.K. FUNDING CORP. P95000043973 (3)

FILED Mar 04 1998 8:00am Secretary of State



Principal Place 3308 TEXAS A 8T. LOUIS PA US		Mailing Address 3308 TEXAS AVE S. ST. LOUIS PARK MN 55420 US	3		DO NOT WRITE IN TH 3. Date Incorporated or Qualified 06/07/1995		
2. Principal Pi	lace of Business	2s. Mailing Address			4. FEI Number	- Ar	polied For
21 26					41-1817794		ot Applicable
		Suite, Apt #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	e e	City & State		•	6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 24	Country 25		Count 0	ry	This corporation owes or has paid the Personal Property Tax due June 30.	☐ Yes 🚺	tangible No
	9, Name and Address of Curr	ent Registered Agent		-T	10. Name and Address of New Registers	d Agent	
417 SU	PITAL CONNECTION 7 E. VIRGINIA ST. ITE 1 LLAHASSEE FL 32301		8 8 8	2 Street Add	ress (P.O. Box Number is Not Acceptable)	. 85 Zip	Code
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOTE:	Registered A		poration submits this statement for the purpose tion's board of directors. I hereby accept the a red when reinstating)	e of changing it appointment as	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	JOHN F. KENEY	☐ DELETE	1.1 TITLE			Change	Addition
HAME	3308 TEXAS AVE S		1.2 NAM				
STREET ADDRESS	ST.LOUIS PARK MIN			ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	1.4 City 21 Title			Change	Addition
NAME			2.2 NAM	i i			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			2.4 CITY				
TITLE		DELETE	3.1 TITLE			Change	☐ Addition
NAME			3.2 NAM	:			
STREET ADORESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE		DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAM	E			.
STREET ADDRESS			4.3 STRE	ET ADORESS			. [
CITY-ST-ZIP			4.4 CITY				4489
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAM		•		1.
STREET ADDRESS				ET ADORESS			1.
CITY-ST-ZIP		FT priese	5.4 CITY			1 01	Addition
TITLE		DELETE	6.1 TITLE	1		Change	Addition
NAME			6.2 NAM	-			
STREET ADDRESS				ET ADDRESS			:
CITY-ST-ZIP			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 13 if chapter or or an attackment with an address.

2-23-98 612-988-9241