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Jun 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000097268 (3)

1. Corporation Name
EAGLE FUNDING GROUP, INC.

Principal Place of Business	Mailing Address
1530 MAIN ST NEWBERRY SC 29108 US	1530 MAIN ST NEWBERRY SC 29108 US

2. Principal Place of Business	**2a.** Mailing Address
21 13907 N. DALE MABRY	26 13907 N. DALE MABRY
22 Suite, Apt. #, etc. SUITE 201	27 Suite, Apt. #, etc. SUITE 201
23 City & State TAMPA FLORIDA	28 City & State TAMPA FLORIDA
24 Zip 33618 / 25 Country USA	29 Zip 33618 / 30 Country USA

3. Date Incorporated or Qualified: 12/26/1995

4. FEI Number: 59-3350117 ☐ 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. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LANE, JEFFREY G
13535 FEATHER SOUND DRIVE
SUITE 405
CLEARWATER FL 34622

10. Name and Address of New Registered Agent

81 Name: JEFFREY G. LANE
82 Street Address (P.O. Box Number is Not Acceptable): 13907 N. DALE MABRY SUITE 201
83
84 City: TAMPA FL 85 Zip Code 33618

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 Jeffrey G. Lane, President — 6/12/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	LANE, JEFFREY G	
STREET ADDRESS	4702 SOUTH BREEZE DR	
CITY-ST-ZIP	TAMPA FL 33624	
TITLE	V	☐ DELETE
NAME	REED, JERRY M	
STREET ADDRESS	13964 106TH AVE N	
CITY-ST-ZIP	LARGO FL 34644	
TITLE	CEO	☒ DELETE
NAME	AHRENS, KELLY H	
STREET ADDRESS	1425 GRIFFIN PARK	
CITY-ST-ZIP	NEWBERRY SC 29108	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CEO P	☒ Change ☐ Addition
1.2 NAME	LANE, JEFFREY G.	
1.3 STREET ADDRESS	16131 BELLE MEADE BLVD.	
1.4 CITY-ST-ZIP	ODESSA, FL. 33556	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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 on an attachment with an address.

SIGNATURE