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 # Parnongraag (1)

FILED Jan 29 1998 8:00am Secretary of State

1. Corporatio	ISIDE FUNDING, INC.		<i>,</i>			
Principal Place of Business Mailing Address				1 10011001 (10 10110 Drive Date) Park Date	t niftid misch effice iffeff feit than	
9799 OLD ST. AUGUSTINE ROAD 9799 OLD ST. AUGUSTIN						
JACKSONVILLE FL 32257 JACKSONVILLE FL 3225			7		DO NOT WRITE IN TH	HIS SPACE
					3. Date Incorporated or Qualified	110 OF AUL
					03/20/1996	
2. Principal Place of Business 2a. Mailing Address					4, FEI Number	Applied For
21		26		59-2718504	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23]		28	Count		Trust Fund Contribution	Added to Fees
Zip	<u>⊢</u> ¬ '	Country Zip		ry	8. This corporation owes or has paid the current year Intangible	
24	9. Name and Address of Curre	29 Ann Registered Agent	[30]		Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
) 50	GRAND, RONALD F	on riogistation rigoni	- 6	1 Name	IO. Hame alla raciosa di tton riagista	ou Agont
	00 OLD ST. AUGUSTINE ROAD	1	<u> </u>			
	CKSONVILLE FL 32257		6	2 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
J. W.	SHOOMHAL I'L GEEGI		8	3		
			_			
			8	4 City	F	EL B5 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Statu	ites, the abo	ve-named co	orporation submits this statement for the purpos ration's board of directors. I hereby accept the	
office or r agent. I a	egistered agent, or both, in the Stal m familiar with, and accept the obl i	te of Florida. Such change was oations of, Section 607,0505, F	i authorized Iorida Statut	by the corpor as:	ration's board of directors. I hereby accept the	appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered a			gont signature rec	quired whon reinslating) DAT	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D LEGRAND, RONALD F		1.1 TITLE			Change Addition
NAME	ATAN ALD OF ALIQUIDANE DOAD		1.2 NAM			
ILOUGOANGILE CL GOOFT		ROAD		ET ADDRESS		
CITY-ST-ZIP TITLE	DELETE		1.4 CITY 2 1 TITLE			Change Addition
NAME			22 NAM	ſ		Onlinge Addition
STREET ADDRESS				ET ADDRESS		
	CITY-ST-ZIP			- 1		
TITLE			2. 4 CITY-ST-ZIP 3.1 TITLE			Change Addition
NAME	AME		3.2 NAM	ſ		·
STREET ADDRESS			3.3 S1RE	ET ADDRESS		
CITY-ST-ZIP	1TY-ST-ZIP		3.4. CITY			
TITLE	DELETE		4.1 TITLE			Change Addition
NAME			4. 2 NAM	E		
STREET ADDRESS			4.3 STRE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE	□ DELETE		5.1 TITLE			Change Addition
NAME			5.2 NAM			
STREET ADDRESS			5.3 STRE	T ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP				
TITLE		DELETE	61 TITLE			Change Addition
NAME			62 NAM			
STREET ADDRESS	7		63 STRE	T ADDRESS		
CITY-ST-ZIP			64 CITY			
14. Thereby o	ertify that the information supplied	with this filing does not qualify	for the exem	ntion stated i	in Section 119.07(3)(i), Florida Statutes. I further	certify that the information

indicated on this annual report or supplied with an advance in december 1807 (30), Florida Statutes. Florida 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 erran attachment with an address.

San, 22 1997