2004 FOR PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

changed, or on an attachment with

SIGNATURE AND T

Apr 07, 2004 08:00 AM Secretary of State **DOCUMENT # P96000073440** 1. Entity Name NATIONSWAY MORTGAGE FUNDING CORPORATION Mailing Address Principal Place of Business 7501 NW 4 ST 7501 NW 4 ST #207 #207 PLANATATION, FL 33317 PLANTATION, FL 33317 US CR2E034 (10/03) 03052004 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0693238 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FERGUSON, CARLTON DO NOT WRITE 5511 NW 88TH TER CORAL SPRINGS, FL 33067 IN THIS SPACE omits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named the obligations of SIGNATURE NOTE, Registered Agent signature required when reinstating) Signature, I U00000105348 9. Election Campaign Financing \$5.00 May Be FILE YOW!!! FEE IS \$150.00 After Mpy 1, 2004 Fee will be \$550.00 04/07/04-80020-021 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE FERGUSON, CARLTON NAME 5511 NW 88TH TER STREET ADDRESS CORAL SPRINGS, FL 33067 CSTY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CSTY - ST - 218 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CATY-ST-ZIP BRE NAME

12. I hereby certify that the information schoolied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 of trustely empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

CARLTON

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED