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

PROFIT

CORPORATION

ANNUAL REPORT

1998

1.1



FLORIDA DEPARTMENT OF STATI

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000087026 (6)

BEST FUNDING CORPORATION

Principal Place	n <b>of B</b> usiness	Mailing Address						
1600 W. EAU GALLIE BLVD. 1417 BRONCO DRIVE SUITE 100 MELBOURNE FL 32910								
MELBOURNE	FL 32935					DO NOT WRITE IN 3. Date Incorporated or Qualified	THIS SPACE	<del></del>
						10/21/1996		
2. Principal P	lace of Business	2a, Mailing Addr	ess			4. FEI Number	Anr	plied For
21		26				59-3406703		Applicable
Suite, Apt. #, etc.		Suite, Apt #,	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 \$8.75 A	
22		27				b. Cermicate of Status Desired	Fee Rec	quired
City & State	Ð	City & State				6. Election Campaign Financing	\$5.00	
<b>Z</b> ip	Country	[28]   Z <sub>(0)</sub>	- <del></del>	Country		Trust Fund Contribution		
24	25	29	-	30		<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>		No
24	9. Name and Address of Cur			,		10. Name and Address of New Regist		
RE	ECE, PAUL W			81	Name			
	565 WESTHAMPTON CIRCLE			82	Street Add	Iress (P.O. Bex Number is Not Aeceptable)		
	SUNGTON FL 33414			["	-/3	117 Bronce Drive		
				83				
				84	City 🕜	2 //	85 Zip C	lode
					· / 9	10/bourne	FF   3%	940
11. Pursuant	to the provisions of Sections 607.0	0502 and 607,1508, Floridate of Florida Such char	da Statutos	s, the above	e-named cor	poration submits this statement for the purportion's board of directors. I hereby accept the	use of changing its e appointment as r	registered registered
agent la	m familiar with, and accept the of	oligations of, Section 607.	0505, Flori	ida Statutes	i.	ment beard of directory according to		tight.
SIGNATURE						uired when reinstating)		
12.	Signature, typed or probed nature of registered  OF LOCELES.	AND DIRI CTORS	(MOII)	13.	n! Signature requ	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS	2 INI 12
TITLE	P	□ DE	LETE	1.1 TITLE		ADDITIONS/STATISED TO STATISETY	Change	Addition
NAME	REECE, PAUL L			1.2 NAME				
STREET ADDRESS	1417 BRONCO DRIVE			1.3 STREET	ADDRESS			
CITY-ST-ZIP	MELBOURNE FL 32940			14 CITY-S	T - 7IP			
TITLE		□ De	TETE	211000			Change	Addition
NAME				2.2 NAME				
STREET ADDRESS	I			2.3 STREUT	ADDRESS			
CITY-ST-ZIP			) CTC	2. 4 CITY - 5	S1 - ZIP		Change	Addition
TITLE		[] DE	LEIC	3 1 11111			□ Change	
NAME STREET ADDRESS				3.2 NAME	ADDRESS			
STREET ADDRESS				33 STREET				
CITY-ST-ZIP TITLE		DE DE	TETE	3.4. C/TY-5	01-78		Change	Addition
NAME				4.2 NAME	}			
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY+ST-ZIP				4.4 CITY - S	- 1			
TITLE			LETE	5.1 101 F			Change	Addition
NAME				5.2 NAME	}			
STREET ADDRESS				5.3 \$1REET	ADDRESS			
CITY-SI-ZIP				5.4 CITY - S				
TITLE	· · · · · · · · · · · · · · ·	□ DE	LETE	6111111			☐ Change	Addition
NAME				6.2 NAME	j			
STREET ADDRESS				6.3 STREET	ADDRESS			

14. Thereby 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 register or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed by on an adia himent with any didress.

01011451155

V. Keen

4/29/98 407-255-7311

**FILED** 

May 18 1998 8:00am

Secretary of State