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 # P96000100788 (4)

CFI GENERAL FUNDING VI, INC.

Principal Place of Business	Mailing Add
C/O MICHAEL MARDER 135 W. CENTRAL BLVD., SUITE 1100	C/O MICHAI 135 W. CEN
ORIANDO EL 32801	ORI ANDO E

FILED May 13 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			A SOOTIONS AND INVIOLENTIAL MATTER RELIGIOUS EASTER A		IFIG(ID)! (#1)	
C/O MICHAEL MARDER 135 W. CENTRAL BLVD SUITE 1100 135 W. CENTRAL BLVD SUITE 110 ORLANDO FL 32801 ORLANDO FL 32801		SUITE 1100		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified			
A Driver of O	lace of Business	A Marine Address			12/13/1996			
<u> </u>	IACH OF DUSINESS	2a. Mailing Address			4. FEI Number		Applied For	
Sulte, Apt.	# otc	Suite, Apt. #, etc.			59-3427895		Not Applicable	
22	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	5 	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Gountry	Zip	Count	ry	8. This corporation owes or has paid the	current year	Intangible	
24	25	29	30		Personal Property Tax due June 30.			
	Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	d Agent		
MAR	RDER, MICHAEL		В	1 Name				
135 WEST CENTRAL BOULEVARD SUITE 1100			6	Street Address (P.O. Box Number is Not Acceptable)				
	ANDO FL 32801		8	3				
			8	4 City		85 Zi	ip Code	
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida, Such change was	authorized I	by the corp	corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	of changing	j its registered as registered	
SIGNATURE	Signature, typed or printed name of registered ag	pent and take if applicable (NO	1t : Registered A	gent signature r	required when reinstaing) DATE			
12.		VD DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12	
TITLE	5	DELETE	1.1 TITLE			Change	e 🔲 Addition	
NAME	SIE GEL, DAVID A		1.2 NAMI	:				
STREET ADDRESS	5601 WINDHOVER DRIVE ORLANDO FL 32819			ET ADDRESS				
CITY-ST-ZIP TITLE	DUDUNO LE 25018	▼ DELETE	1.4 CITY 2.1 TITLE			Change	a les Addition	
	SIEGEL, BETTIE I	i d i precie	1		D	L_1 Cuange	e 😾 Addition 🤇	
NAME	5601 WINDHOVER DRIVE		2 2 NAM	- 1	DUGAN, THOMAS F		1	
STREET ADDRESS	ORLANDO FL 32819			ET ADDRESS	5601 WINDHOVER DRIVE			
CITY-ST-ZIP	D CHENTIOU FE 32018	☐ DELETE	2.4 CITY		ORLANDO, FL 32819	Chann	e Addition	
TITLE	MILLER, WILLIAM E III	ריי מנונונ	3 1 TITLE	- 1		☐ Change	c Manifoli	
NAME	ROUTE 1, BOX 1190		3.2 NAM					
STREET ADDRESS	BERRYVILLE VA 22611			ET ADDRESS			1	
CITY-ST-ZIP	OCHNI VILLE VA 22011	☐ DELETE	3.4 CITY			Change	e Addition	
TITLE			4.1 TITLE	1			s Madition	
NAME			4. 2 NAM					
STREET ADDRESS			1	ET ADDRESS				
CITY-ST-ZIP		DEVETE	4.4 CITY			1105	1 1 1 1 1 1 1 1	
TITLE		DELETE	5.1 TITLE	ſ		Change	e	
NAME			5.2 NAM]	
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			5.4 City					
TITLE		DELETE	6.1 TITLE	1		L Change	e 🔲 Addition	
NAME			6.2 NAM	- 1]	
STREET ADDRESS			6.3 STRE	ET ADDRESS			1	
CITY-ST-ZIP			6.4 CITY	ST-ZIP	0.0000000000000000000000000000000000000			

r nereby 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 employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed as an an attachment with an address.