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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90067 041 ***150.00

i. Corporation	MENT # P97000 ED FUNDING CORPORATION						
Principal Place of Business Mailing Address						1 68156 4 (\$11 59 (\$)) B (
235 SOUTH MAITLAND AVENUE 235 SOUTH MAITLAND AVE SUITE 216 SUITE 216 MAITLAND FL 32751 MAITLAND FL 32751					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					01/21/1997		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable		
21	<u>.</u>	26 Suite Ant # sto	Suite, Apt. #, etc.		59-3506428	\$8.75 A	
				5. Certifcate of Status Desired	Fee Re		
27 27 City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23 28 28		28			Trust Fund Contribution	Added t	
Zip			Country		8. This corporation owes the current year I	ntangible □Yes	DONO.
24	9. Name and Address of Curre		30		Personal Property Tax. 10. Name and Address of New Registered		
	9. Name and Address of Curre	iit Registered Agent	81	Name	To. Traine diversity	<u> </u>	
	KER, BERRY J JR		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
235 SOUTH MAITLAND AVENUE			-				1 m 1 m 1 m 1 m 1
SUITE 216			83				
MAITLAND FL 32751			84	City	F	85 Zip (ode
office or re agent. I as	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation o	ations of, Section 607.0505, Florie BERRY J. WALI ent and title if applicable. (NOTE: F	da Statutes KEK Registered Igen	the corporation		9/99	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	PD BEDDY LID	[] DECE IE	ł				
NAME STREET ADDRESS	NAME WALKER, BERRY J JR						
CITY-ST-ZIP	- 225 STILITH MALILAND AVE :	#216	1.2 NAME	ADORESS			
	235 SOUTH MAITLAND AVE. :	#216	1.3 STREET				
	235 SOUTH MAITLAND AVE. 1 MAITLAND FL 32751	#216	- ·			Change	☐ Addition
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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, open an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/99 Date

407-644-6535

CR2E034 (11/98)