NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. IN TOUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMEN

Principal Place of Business

2. Principal Place of Business

607 W. ROBERTSON ST.

SIGNATURE:

BRANDON_EL_33511

P97000096857 (2)

Mailing Address

BRANDON FL 33511

2a. Mailing Address

607 W. ROBERTSON ST.

AFFORDABLE HOME FUNDING OF BRANDON, INC.

21		26				59-346577	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75 Additional
22		27	27			5. Certificate of Status Desired	Fee Required
City & State City & State			ate	<u> </u>		6. Election Campaign Financing	\$5.00 May Be
23 28			_		Trust Fund Contribution	Added to Fees	
Zip Country Zip			Country	. <u>.</u>	8. This corporation owes or has paid the cur	rent year Intangible	
24	25 25	29	30) <u> </u>		This corporation owes or has paid the cur Personal Property Tax due June 30.	Yes 🗶 No
Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent
VACCARO, NATHAN					Name		
607 W. ROBERTSON ST.				82 Street Address (P.O. Box Number is Not Acceptable)			
BRANDON FL 33511							
				83	_ "	-	
				84	City		85 Zip Code
				04	City	FL	85 Zip Code
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered							
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered agent ar	d title if applicable.	(NOTE:	Registered A	gent signature requir	red when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	District the second		DELETE	1.1 TITLE	T		Change Addition
NAME	VACCARO, NATHAN			1.2 NAME	J		
STREET ADDRESS	607 W. ROBERTSON ST.			1.3 STREET	ADDRESS		
CITY-ST-ZIP	BRANDON FL 33511			1.4 CITY-ST-	-ZIP		ļ
TITLE			DELETE	2.1 TITLE	7		Change Addition
NAME				2.2 NAME	}		
STREET ADDRESS				2.3 STREET	ADDRESS		
CITY-ST-ZIP				2.4 CITY-ST-	.ZIP		Ì
TITLE			DELETE	3.1 TITLE			Change Addition
NAME		_	, 5000.0	3.2 NAME			
STREET ADDRESS				3.3 STREET	ADDRESS		
CITY-ST-ZIP				3.4 CITY-ST	.ZIP		Ì
TITLE			DELETE	4.1 TITLE			Change Addition
NAME "			, 022272	4.2 NAME		~	onango naanon
STREET ADDRESS		•	. ~	4.3 STREET	ADDRESS		
CITY-ST-ZIP	•			4.4 CITY-ST-	JIP		
TITLE : " " " " " " " "	** 2 * /		DELETE	5.1 TITLE			Change Addition
NAME				5.2 NAME	ĺ		
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP		٠,	4	5.4 CITY-ST-			
TITLE			DELETE	6.1 TITLE		The second secon	Change Addition
NAME ,				6.2 NAME			
STREET ADDRESS				6.3 STREET	ADDRESS		-
CITY-ST-ZIP			1.3	6.4 CITY-ST-			-
14. I hereby ce	ertify that the information supplied with th	s filing does not	qualify for the s	exemption	stated in section	on 119.07(3)(i), Florida Statutes. I further certify	that the information
indicated on this annual report or supplemental annual perox 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 ecceptor trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears							

FILED Oct 15, 1998 8:00 A.M. Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date incorporated or Qualified....

11/10/1997 4. FEI Number