COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT # P9800002981

HARBOR CITY FUNDING, INC.

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

09-07-1999 90005 013 ***150.00



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ncipal Plac	e of Business	Mailing Address	,			1 (86)(88) (19)8(6) (8(1) Estit Shift Shi	
	R CITY BLVD.	1900 S. HARBOR CITY BLV	(0.				
E 323 SUITE 323 Bourne Fl 32901 Melbourne Fl 32901						DO NOT WRITE IN THIS SPACE	
Andrew Control of April 1					3. Date Incorporated or Qualified		
		٠			Ì	03/30/1998	
Principal Place of Business 2a. Mailing Address			1 *************************************			4. FEI Number Applied For	
174 W. COMSTUCK AVE 26 174 W. Coms			STOCK	OCK Ave.		59-3504741 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 205						5. Certificate of Status Desired \$8.75 Additional Fee Required	
		City & State	. 0		- ,	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	Country	Zip		intry		8. This corporation owes the current year	
3278	9 25 USA	29 32789	30	USA		Intangible Personal Property. Yes No	
	9. Name and Address of Curren	t Registered Agent		04 1		10. Name and Address of New Registered Agent	
CHIL	ICKEUN BUBERT D			81 Name	•		
GULLICKSON, ROBERT D 549 A1A				82 Street	et Address (P.O. Box Number is Not Acceptable)		
SATELLITE BEACH FL 32937				83			
OAIL	LETE BEACHTE 02307			53			
				84 City		FL 85 Zip Code	
Pursuant	to the provisions of sections 607.0502	and 607.1508, Florida Statute	s, the ab	ove-named	corporat	ation submits this statement for the purpose of changing its registered n's board of difectors. I hereby accept the appointment as registered	
agent. I	registered agent, or both, in the State am familiar with, and accept the obliga	itions of, section 607,0505, Flo	orida Şta	tutes.	7		
NATURE	Robert D. Gul	lickson Vieside	NIC	FO	<u> </u>	M 4 Bles 8/30/99	
	Signature, typed or printed name of registered agen			ared Agent signal	rsue cedagise	red when reinstating) DATE (ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	OFFICERS AN	···· / · ·	13.		1	ADDITIONS/CHANGES TO CITICERS AND DIRECTOR IN 12	
	OHILIOVONI BOREDT D	DELETE	1.2 N		Gu	Illickson, Robert D.	
:	GULLICKSON, ROBERT D 549 A1A			REET ADORESS		14 N. ORANGE AVE.	
ET ADDRESS	SATELLITE BEACH FL 32937		i i	TY-ST-ZIP		2LANDO, FL 32803	
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T-ZIP				TY-ST-ZIP	<u> </u>		
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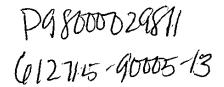
hereby certify that the information supplied with this filling does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information adicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am in 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 a Block 12 or Block 13 if chapted, or on an attachment with an address.

SNATURE:

407-702-6656

Harbor City Funding, Inc.

174 W Comstock Ave. Ste 205 Winter Park, Fl. 32789



September 2, 1999

Divisions of Corporations

Dear Sir or Madam:

I have sent a check for the initial fee of One Hundred and Fifty Dollars, due to the fact I had never received the first notice. I personally had moved as well as the office location.

After discussing-this with a-representative-from your-office, they had-advised-me-on-the-periods-and procedures, I now will have no excuse. Thank you for your help and understanding.

enicere)

Robert Gullickson Chief Executive Officer