

2003

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

200:

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91299 050 ***150.00

DOCUMENT # **999000036869**

1. Entity Name
Executive Mortgage Funding, Inc.



DO NOT WRITE IN THIS SPACE

11024001

2. Principal Place of Business
11983 TAMiami Tr. N
Suite, Apt. #, etc.
#130
City & State
NAPLES, FL.
Zip
34110 Country

3. Mailing Address
11983 TAMiami Tr. N
Suite, Apt. #, etc.
#130
City & State
NAPLES, FL.
Zip
34110 Country

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4. FEI Number
59-3571065 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

7. Name and Address of Current Registered Agent

MARLENE BINGER
Street Address (P.O. Box Number is Not Acceptable)
876 GULF PAVILION DR. #205
NAPLES FL 34108

DO NOT WRITE
IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARLENE BINGER #205 876 GULF PAVILION DR. NAPLES, FL 34108	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

MARLENE BINGER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-2003 239-577-1800

Date

Daytime Phone #

MARLENE BINGER

CR2E034B (12/02)