## 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 # V45600

(6)

FRANKLIN FINANCIAL FUNDING, INC.

F	FILED
May 21	1998 8:00am
Secret	tary of State

Principal Place of Business Mailing Address		T HEBUL BUIDUL BUBBU DUHU BUKK BUKK DUHU	BYON BIBN BIBN BIBN BIBN BIBN HODI			
850 CENTRAL AVE. 850 CENTRAL AVE.						
SUITE 104 SUITE 104			DO NOT WRITE	IN THIS SPACE		
NAPLES FL 33940 NAPLES FL 33940			3. Date Incorporated or Qualified	IV THIS ST ACE		
			06/15/1992			
2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For		
21 SAME 26 SAME			65-0353834	Not Applicable		
Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional			
City & State	27			Fee Required		
City & State	& State City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
<b>Zip</b> Country	Zip	Country	8. This corporation owes or has paid	d the current year Intangible		
24 34102 25 USA	29 34102	30 V SA	Personal Property Tax due June			
9. Name and Address of Current	Registered Agent	641	10. Name and Address of New Reg	Istered Agent		
SIKET, ANDREW G.   81 Nam			5ame	.50me.		
	2840 <b>G</b> OLDEN GATE PKWY			e)		
STE 315		83				
NAPLES FL 33942						
		84 City		FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statut	tes, the above-name	d corporation submits this statement for the pu	troope of changing its registered		
office or registered agent, or both, in the State of agent. Lam familiar with and accept the obligation	t Florida. Such ch <b>ange wa</b> s i ons of, Section 60 <b>7.0</b> 505, Fl	authorized by the co orida Statutes.	rporation's board of directors. I hereby accept	the appointment as registered		
SIGNATURE						
Signature, typed or printed name of imprecial agent			ra required when reinstating)	DATE		
12. OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change Addition		
NAME HAYS, KAREN A		1.2 NAME		- Change - Theorem		
		1.3 STREET ADDRESS		[ ]		
CITY-ST-ZIP NAPLES FL		1.4 City - St - ZIP				
TITLE <b>VT</b>	DELETE	2.1 TITLE		Change Addition		
NAME HAYS, WAYNE		2.2 NAME				
STREET ADDRESS 850 CENTRAL AVE, STE 104		2.3 STREET ADDRESS				
CITY-ST-ZIP NAPLES FL		2. 4 CITY - ST - ZIP				
TITLE	DELETE	3.1 TITLE		☐ Change ☐ Addition		
NAME		3.2 NAME		l.		
STREET ADDRESS		3.3 STREET ADDRESS				
CITY-ST-ZIP	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition		
NAME		4. 2 NAME		C cuanto		
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY-ST-ZIP				
TITLE	DELETE	5 1 TITLE		Change Addition		
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP		5.4 CITY - ST - ZIP				
TITLE	☐ DELETE	6.1 TITLE		Change Addition		
NAME		62 NAME				
STREET ADDRESS		6.3 STREET ADDRESS				
CITY-ST-ZIP	this files does not a self-f	6.4 CITY - ST - ZIP	led in Continue 110 07(0)(). Florida Continue 15			

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 or on an attachment with an address.

1.6.90

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