2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V45600

1. Entity Name

FRANKLIN FINANCIAL FUNDING, INC.



FILED Apr 09, 2007 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

850 CENTRAL AVE.

STE 300 NAPLES, FL 34102 US 850 CENTRAL AVE. STE 300

NAPLES, FL 34102 US



DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIKET, ANDREW G 1100 FIFTH AVE. SOUTH, STE. 301 NAPLES, FL 34102

DO NOT WRITE IN THIS SPACE

				1 2 2 3	IIIO 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 tritle if applicable (NOTE: Registered Agent signature (equived when reinstating) DATE					
	E NOW!!! FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS - CITY-ST-ZIP	PS HAYS, KAREN A 850 CENTRAL AVE, STE 300 NAPLES, FL 34102				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARINO, RITA K 850 CENTRAL AVE., STE 300 NAPLES, FL 34102				000000696017 04/17/07-80083-019 150.00
TITLE NAME STREET ADORESS CITY-ST-ZIP	T MARINO, MARCO M 850 CENTRAL AVE., STE 300 NAPLES, FL 34102			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE -					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 Block 11 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

Ries

414107

8820

Deytime Phone #