

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001900

Entity Name: MISSION FIRST COAST, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

710 WINFRED DR. NORTH
ORANGE PARK, FL 32073

New Principal Place of Business:

1547 HARBOR OAKS RD
JACKSONVILLE, FL 32207

Current Mailing Address:

P.O. BOX 16388
JACKSONVILLE, FL 32245

New Mailing Address:

1547 HARBOR OAKS RD
JACKSONVILLE, FL 32207

FEI Number: 59-3504314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUSK, TIM
710 WINFRED DR. NORTH
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

CORLEY, TED M
1547 HARBOR OAKS RD
JACKSONVILLE, FL 32207 US

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.

SIGNATURE: TED M. CORLEY

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: WILLIAMS, DANIEL W
Address: 39 S ROSCOE BLVD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S () Delete
Name: NELSON, MICHAEL
Address: 2308 SOUTEL DR
City-St-Zip: JACKSONVILLE, FL 32208

Title: P () Delete
Name: LUSK, TIM
Address: 710 WINFRED DR. NORTH
City-St-Zip: ORANGE PARK, FL 32073

Title: T () Delete
Name: GOLDSMITH, BEN
Address: 5860 MT CARMEL TERRACE
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ROWE, RON
Address: 2700 S. UNIVERSITY BLVD.
City-St-Zip: JACKSONVILLE, FL 32216

Title: S (X) Change () Addition
Name: LARRY, LOWRY
Address: 3844 BURNETT PARK RD.
City-St-Zip: JACKSONVILLE, FL 32258

Title: P (X) Change () Addition
Name: CORLEY, TED M
Address: 1547 HARBOR OAKS RD
City-St-Zip: JACKSONVILLE, FL 32207

Title: T (X) Change () Addition
Name: YOUNG, WAYNE
Address: 5400 VERNE BLVD
City-St-Zip: JACKSONVILLE, FL 32205

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TED M. CORLEY

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date