

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117184

FILED
Jan 05, 2004
Secretary of State

Entity Name: AMERIFIRST CAPITAL CORP.

Current Principal Place of Business:

814 A1A NORTH
SUITE 300
PONTE VEDRA BEACH, FL 322082

New Principal Place of Business:

Current Mailing Address:

814 A1A NORTH
SUITE 300
PONTE VEDRA BEACH, FL 32082 US

New Mailing Address:

FEI Number: 41-2065933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMSTRONG, DAN W
814 A1A NORTH
SUITE 306
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

ARMSTRONG, DAN W
822 A1A NORTH
SUITE 303
PONTE VEDRA BEACH, FL 32082 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: _____ 01/05/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TOOKE, JOHN
Address: 814 A1A NORTH, SUITE 300
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: S () Delete
Name: ELLIS, BRITTANY M
Address: 814 A1A NORTH STE 300
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: D () Delete
Name: ARNETTE, DAWN
Address: 814 A1A NORTH STE 300
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: D () Delete
Name: KANN, THOMAS
Address: 1712 H OSBORNE RD
City-St-Zip: ST. MARYS, GA 31558 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MD (X) Change () Addition
Name: ARNETTE, DAWN
Address: 1712-H OSBORNE RD
City-St-Zip: ST. MARYS, GA 31558 US

Title: MD (X) Change () Addition
Name: KANN, THOMAS
Address: 1712 H OSBORNE RD
City-St-Zip: ST. MARYS, GA 31558 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRITTANY ELLIS S 01/05/2004
Electronic Signature of Signing Officer or Director Date