

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90278 047 ***158.75

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # K72602

1. Entity Name
FIRST NETWORK REALTY, INC.



Principal Place of Business

11576 A SAN JOSE BLVD.
JACKSONVILLE, FL 32223 US

Mailing Address

4190 BELFORT RD.
STE. 475
JACKSONVILLE, FL 32216 US

11013950



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number
59-2960388

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

STEFFEY, FRED H
6620 SOUTHPOINT DR. SOUTH
STE 300
JACKSONVILLE, FL 32216

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 DV ☐ Delete
NAME PETWAY, THOMAS I
STREET ADDRESS 4190 BELFORT RD., STE. 475
CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE DAST ☐ Delete
NAME BOWER, E. B
STREET ADDRESS 4190 BELFORT RD., STE. 475
CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE DPST ☐ Delete
NAME MCGRIF, W. A
STREET ADDRESS 4190 BELFORT RD, STE. 475
CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE V ☐ Delete
NAME HORNE, RONALD G
STREET ADDRESS 2594 FRANKLIN CT.
CITY-ST-ZIP ORANGE PK., FL 32073

TITLE V ☐ Delete
NAME HILL, CAROL A
STREET ADDRESS 4190 BELFORT ROAD, SUITE 475
CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carol A. Hill, Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/03

Date

904-296-6400

Daytime Phone #

CR2E034 (10/02)