

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 25 1998 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **368407** (3) 714
1. Corporation Name **FLORIDA FIRST SERVICE CORPORATION**
JAN 20 1998 7386

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| Principal Place of Business 1201 W. PEACHTREE ST., NE STE 1800 ATLANTA GA 30309-3415 US | Mailing Address 1201 W. PEACHTREE ST., NE STE. 1800 ATLANTA GA 30309-3415 US |
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DO NOT WRITE IN THIS SPACE

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| 2. Principal Place of Business 21 1910 Pacific Ave Suite, Apt. #, etc. 22 16th Fl City & State 23 Dallas, TX 75201 Zip 24 75201 Country 25 US | 2a. Mailing Address 26 1910 Pacific Ave. Suite, Apt. #, etc. 27 16th Fl City & State 28 Dallas, TX 75201 Zip 29 75201 Country 30 US | 3. Date Incorporated or Qualified 08/14/1970 4. FEI Number 59-1304990 Applied For Not Applicable 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No |
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| 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 | 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code |
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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| 12. OFFICERS AND DIRECTORS | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE PD <input checked="" type="checkbox"/> DELETE NAME CORRIGAN, RICHARD STREET ADDRESS 1201 W. PEACHTREE W. ST., NE., STE. 1800 CITY-ST-ZIP ATLANTA GA | 1.1 TITLE PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME JUST, RANDY 1.3 STREET ADDRESS 1910 Pacific Ave., 16th Fl 1.4 CITY-ST-ZIP Dallas, TX 75201 |
| TITLE STD <input checked="" type="checkbox"/> DELETE NAME ROSSETTI, JOHN P. STREET ADDRESS 1201 W. PEACHTREE ST., NE, STE. 1800 CITY-ST-ZIP ATLANTA GA | 2.1 TITLE DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME BELL, DANIEL M. 2.3 STREET ADDRESS 1910 Pacific Ave., 16th Fl 2.4 CITY-ST-ZIP Dallas, TX 75201 |
| TITLE VASD <input checked="" type="checkbox"/> DELETE NAME FARRELL, CHARLES P. STREET ADDRESS 1201 W. PEACHTREE ST., NE, STE. 1800 CITY-ST-ZIP ATLANTA GA | 3.1 TITLE DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME CAMPAGNA, FRANK 3.3 STREET ADDRESS 1910 Pacific Ave., 16th Fl 3.4 CITY-ST-ZIP Dallas, TX 75201 |
| TITLE DVPS <input checked="" type="checkbox"/> DELETE NAME RAY, PATRICIA J STREET ADDRESS 1201 W. PEACHTREE ST., NE, STE. 1800 CITY-ST-ZIP ATLANTA GA | 4.1 TITLE DST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME SCHUG, JOHN 4.3 STREET ADDRESS 1910 Pacific Ave., 16th Fl 4.4 CITY-ST-ZIP Dallas, TX 75201 |
| TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP | 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP |
| TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP | 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP |

14. 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.

Randy Just **RANDY JUST** 2.13.98 0211-150104

CR2E034 (10/97)