

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 622763

FILED
Jan 29, 2004
Secretary of State

Entity Name: FAMILY FIRST MORTGAGE CORP.

Current Principal Place of Business:

33 OLD KINGS ROAD NORTH
SUITE 1
PALM COAST, FL 32137 US

New Principal Place of Business:

Current Mailing Address:

33 OLD KINGS ROAD NORTH
SUITE 1
PALM COAST, FL 32137 US

New Mailing Address:

FEI Number: 59-1980977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILL, GREGORY L
33 OLD KINGS ROAD NORTH
SUITE 1
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: AS () Delete
Name: HILL, EDWIN L.,
Address: 915 MILL ROAD LANE
City-St-Zip: DAYTONA BEACH, FL 32127

Title: PTD () Delete
Name: HILL, GREGORY L.,
Address: 25 EAST LAKE DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: VP () Delete
Name: HILL, BRUCE E.,
Address: 297 EAST RIVERS EDGE
City-St-Zip: BOONE, NC 28607

Title: VP (X) Delete
Name: HILL, POLLY S
Address: 25 EAST LAKE DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: VS (X) Delete
Name: JENSEN, SHERYL
Address: 104 ARBOR WAY APT 2-D
City-St-Zip: CARY, NC 27513

Title: VASD (X) Delete
Name: HILL, GLENN M
Address: 3 CEDAR POINT DRIVE
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: HILL, GREGORY L
Address: 25 EASTLAKE DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: VPAS (X) Change () Addition
Name: HILL, GLENN M
Address: 3 CEDAR POINT DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change () Addition
Name: BOWEN, THOMAS L JR
Address: 40 SOUTHLAKE DRIVE
City-St-Zip: PALM COAST, FL 32137

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

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

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

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: GREGORY L. HILL

PRES

01/29/2004

Electronic Signature of Signing Officer or Director

Date