

622743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

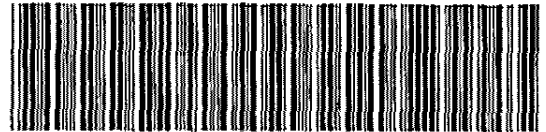
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600035225746

05/04/04--01020--013 \*\*35.00

FILED  
04 MAY -3 AM 10:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Planch  
5/8/04

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Family First Mortgage Corp.
2. The principal office address: 33 Old Kings Road North, Ste. 1, Palm Coast, FL 32137
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5/23/1979 Document number: 622763
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Gregory L. Hill

33 Old Kings Road North, Ste. 1

Palm Coast, FL 32137

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.

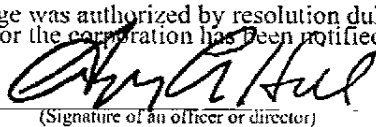
526 E. Park Avenue

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Gregory L. Hill, President

(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

NRAI Services, Inc.

by: 

(Signature of Registered Agent)

April 23, 2004

(Date)

If signing on behalf of an entity:

Michael Mirrione

(Typed or Printed Name)

Assistant Secretary

(Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED  
04 MAY -3 AM 10:27  
CLERK OF STATE  
TALLAHASSEE, FLORIDA