


2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 676956		
1. Entity Name FIRST CENTURY PROPERTIES, INCORPORATED		

Principal Place of Business 1940 10TH AV C1 VERO BEACH, FL 32961 US	Mailing Address 1940 10TH AV C1 VERO BEACH, FL 32961 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

08142008 Chg-P CR2E034 (12/06)

4. FEI Number
59-2032103

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
IGOE, JOHN G 250 ROYAL PALM WAY STE 300 PALM BEACH, FL 33480		Name <i>Terry Goff</i>	
		Street Address (P.O. Box Number is Not Acceptable) <i>1940 10th Av</i>	
		City <i>VERO BEACH</i> FL Zip Code <i>32961</i>	

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 *Terry Goff*
Signature, typed or printed name of registered agent, and fee if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MASOTTI, RINO 1780 N TALBOT RD WINDSOR ONT, CAN 00000, <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000138238930 11/24/08--01059--017 **\$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MCMAHON, FRANCIS J. 2326 S CONGRESS AVE 2F W. PALM BCH., FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GOFF, TERRY 1940 10TH AV VERO BEACH, FL 32696 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Terry Goff*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: 11-12-08 Daytime Phone #: 772-562-5611

FILED
08 NOV 24 AM 9:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



11/25