

2001 UNIFORM BUSINESS REPORT (UBR)

47

FILED
May 23, 2001 8:00 am
Secretary of State

04-24-2001 90354 044 ****61.25

DOCUMENT # 770003

1. Entity Name

FLORIDA FIRST CAPITAL FINANCE CORPORATION, INC.

Principal Place of Business

1711 S GADSDEN ST
 TALLAHASSEE FL 32301
 US

Mailing Address

PO BOX 4166
 TALLAHASSEE FL 32315
 US

2. Principal Place of Business

1351 N. Gadsden St
 Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

4. FEI Number

59-2515700

Applied For

Not Applicable

Zip

32303

Country

LEON

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

KOCOUREK, TODD G
1242 N DUVAL ST
TALLAHASSEE FL 32303

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.

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 \$61.25

9. Election Campaign Financing:
 Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO KOCOUREK, TODD G. 1242 N DUVAL ST TALLAHASSEE FL 32303	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEGENNARO, JAMES J 600 N BROADWAY #300 BARTOW FL 33830	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT JACKSON, NORWOOD 24184 WESTMINSTER COURT BROOKSVILLE FL 34601	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HOBBS, GREGORY 1711 S GADSDEN ST TALLAHASSEE FL 32301	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUSE, CLAIRE 1711 S GADSDEN ST TALLAHASSEE FL 32301	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Degennaro, James J 600 N Broadway #300 Bartow, FL 33830	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Nompleggi, Pat 200 E. Robinson St, Suite 600 Orlando, FL 32801	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Washi, Lamar 111 Riverside Avenue Jacksonville, FL 32202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jackson, Norwood 24184 Westminister Court BROOKSVILLE, FL 34601	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Hobbs, Gregory 1711 S. Gadsden St Tallahassee, FL 32301	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Fancher, Stephen 5600 NW 36th St 6th Floor PO Box 526524, Miami, FL 33152	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D McKay, Benjamin The Capitol, PL-02 Tallahassee, FL 32399	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 617, 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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Date: **5/16/01**
 Daytime Phone #: **850/681-3601**

CR2E037 (10/00)

Addition

D
Bliss, Gary
PO Box 2275
Tallahassee, FL 32316

attachment

D# 770003



46235