

Amendment

\$61.25

FILED

03 DEC 17 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F02000000300			
1. Entity Name NATIONSFIRST FINANCIAL CORPORATION			
Principal Place of Business 100 SYCAMORE STREET GLASTONBURY, CT 06033 US		Mailing Address 100 SYCAMORE STREET GLASTONBURY, CT 06033 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 06-1530061		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ENGLISH, JAMES A 245 OVERBROOK BLVD LARGO, FL 33770		7. Name and Address of New Registered Agent Name Terry Neenan Street Address (P.O. Box Number is Not Acceptable) 5700 NW 50th Street City Bell FL Zip Code 32619	
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 <u>Terry Neenan</u> Terry Neenan DATE 11/22/2003 (NOTE: Registered Agent's signature required when withdrawing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD CENDANA, RAINIER 100 SYCAMORE STREET GLASTONBURY, CT 06033	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP PDT Rainier Cendana	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD STARR, SCOTT T 100 SYCAMORE STREET GLASTONBURY, CT 06033	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP VDS Scott T. Starr	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP STD CENDANA, JANICE 100 SYCAMORE STREET GLASTONBURY, CT 06033	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 100025538231 12/16/03--01073--004 ***61.25	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD CONNELL, TIMOTHY R 12600 E. 40 HIGHWAY INDEPENDENCE, MO 64056	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 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: <u>Rainier Cendana</u> (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)		Date 11-13-03 Time 8:40 Phone 430-1032	

CR2EG34 (10/02)