

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90399 017 ***150.00

0022451

DOCUMENT # H41684

1. Entity Name
FIRST COAST PARTNERS, INC.

Principal Place of Business 3020 HARTLEY ROAD SUITE 300 JACKSONVILLE FL 32257	Mailing Address 3020 HARTLEY ROAD SUITE 300 JACKSONVILLE FL 32257
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number **59-2500346**

Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

**FARRELL, MARK T
 3030 HARTLEY RD
 STE 100
 JACKSONVILLE FL 32257**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
**3020 HARTLEY ROAD STE 300
 JACKSONVILLE, FL 32257**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ROOD, JOHN D.	
STREET ADDRESS	3020 HARTLEY ROAD, STE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	DS	<input type="checkbox"/> Delete
NAME	ARNALL, JOSEPH H.	
STREET ADDRESS	814 HIGHWAY A1A NORTH, SUITE 204	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 38082	
TITLE	DT	<input type="checkbox"/> Delete
NAME	HAZARD, JOHN E.	
STREET ADDRESS	P O BOX 1398	
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32004-1398	
TITLE	V	<input type="checkbox"/> Delete
NAME	FARRELL, MARK T	
STREET ADDRESS	3020 HARTLEY ROAD, STE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	V	<input type="checkbox"/> Delete
NAME	SMITH, BERNARD E	
STREET ADDRESS	3020 HARTLEY ROAD, SUITE 300	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark T. Farrell Mark T. Farrell April 19, 2001 (904) 260-3030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)