

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K08222

FILED  
Apr 15, 2002 8:00 AM  
Secretary of State

Entity Name: FIRST FINANCIAL INVESTMENT ADVISORS, INC.

**Current Principal Place of Business:**

2699 LEE RD., STE. 460  
WINTER PARK, FL 32789

**New Principal Place of Business:**

230 NORTH WESTMONTE DRIVE  
SUITE 2200  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

2699 LEE RD., STE. 460  
WINTER PARK, FL 32789

**New Mailing Address:**

230 NORTH WESTMONTE DRIVE  
SUITE 2200  
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-2862852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILLARD, KARL P.  
2699 LEE RD  
SUITE 460  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

WILLARD, KARL P.  
230 NORTH WESTMONTE DRIVE  
SUITE 2200  
ALTAMONTE SPRINGS, FL 32714 US

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: KARL P. WILLARD

04/15/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPVS ( ) Delete  
Name: WILLARD, KARL P.  
Address: 2699 LEE RD SUITE 460  
City-St-Zip: WINTER PARK, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: WILLARD, KARL P.  
Address: 230 NORTH WESTMONTE DR, SUITE 2200  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KARL P. WILLARD

DPST

04/15/2002

Electronic Signature of Signing Officer or Director

Date