

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000013271

FILED
Apr 11, 2003
Secretary of State

Entity Name: FIRST FINANCIAL, PL

Current Principal Place of Business:

C/O 9140 GOLFSIDE DRIVE
11
JACKSONVILLE, FLORIDA, FL [32256] FL

New Principal Place of Business:

C/O JACKSONVILLE, FLA.
JACKSONVILLE, FLORIDA, FL [32256] FL

Current Mailing Address:

C/O 9140 GOLFSIDE DRIVE
11
JACKSONVILLE, FLORIDA, FL [32256] FL

New Mailing Address:

C/O 2744 U.S. 1 SOUTH
ST. AUGUSTINE, FLORIDA, FL [32086] FL

FEI Number: 59-3675252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEVENS, CHARLES
C/O 2744 U.S. 1 SOUTH
ST. AUGUSTINE, FLORIDA, FL [32086] FL

Name and Address of New Registered Agent:

STEVENS, C
C/O 2744 U.S. 1 SOUTH
ST. AUGUSTINE, FLORIDA, FL [32086] FL

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: C. STEVENS

04/11/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: WILLIAMS, TED
Address: C/O 7035 PHILLIPS HIGHWAY, #5116
City-St-Zip: JACKSONVILLE, FLORIDA, FL [32256] FL

Title: MGR () Delete
Name: STEVENS, CHARLES
Address: C/O 2744 U.S. 1 SOUTH
City-St-Zip: ST. AUGUSTINE, FLORIDA, FL [32086] FL

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: T WILLIAMS

MGRM

04/11/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date