

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northern
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # **L54905** (9)

1. Corporation Name
FIRST FIDELITY GROUP, INC.

Principal Place of Business: **4500 BRAEWICK ST. WINTER SPRINGS FL 32708**
Mailing Address: **1500 BRAEWICK ST. WINTER SPRINGS FL 32708**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **03/05/1990** 3a. Date of Last Report: **02/01/1994**
4. FEI Number: **65-0186863** Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **1226 Oxbow Lane** 2a. Mailing Address: **1226 Oxbow Lane**
21. City & State: **City & State** 26. City & State: **City & State**
22. City & State: **City & State** 27. City & State: **City & State**
23. City & State: **City & State** 28. City & State: **City & State**
24. Zip: **Zip** 25. Country: **Country** 29. Zip: **Zip** 30. Country: **Country**

9. Name and Address of Current Registered Agent
HUNT, DONALD D.
4500 BRAEWICK STREET **1226 Oxbow Lane**
WINTER SPRINGS FL 32708

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City B5 Zip Code: **FL**

11. Pursuant to the provisions of Sections 007.0502 and 007.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 007.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|----------------------|---|--|
| TITLE | DP | 11 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | HUNT, DONALD D | 12 NAME | |
| STREET ADDRESS | 1500 BRAEWICK STREET | 13 STREET ADDRESS | 1226 Oxbow Lane |
| CITY, ST, ZIP | WINTER SPRINGS FL | 14 CITY, ST, ZIP | |
| TITLE | | 21 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 22 NAME | |
| STREET ADDRESS | | 23 STREET ADDRESS | |
| CITY, ST, ZIP | | 24 CITY, ST, ZIP | |
| TITLE | | 31 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 32 NAME | |
| STREET ADDRESS | | 33 STREET ADDRESS | |
| CITY, ST, ZIP | | 34 CITY, ST, ZIP | |
| TITLE | | 41 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 42 NAME | |
| STREET ADDRESS | | 43 STREET ADDRESS | |
| CITY, ST, ZIP | | 44 CITY, ST, ZIP | |
| TITLE | | 51 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY, ST, ZIP | | 54 CITY, ST, ZIP | |
| TITLE | | 61 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY, ST, ZIP | | 64 CITY, ST, ZIP | |

14. I hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer, director, or trustee of the corporation or trust or otherwise authorized to execute the report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12. Block 13 is for an attachment with an address.

SIGNATURE: *Donald D. Hunt* **Donald D. Hunt** Date: **3-8-95** Phone: **407-359-7164**