2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M51272

FIRST NORTHWEST FLORIDA HOLDING COMPANY



Principal Place of Business

Mailing Address

101 E 23 ST PANAMA CITY, FL 33405-4501 US P O BOX 59900

PANAMA CITY, FL 32412-0900 US

FILED Apr 02, 2004 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03302004 No Chg-P CR2E034 (10/03)

Applied For 4, FEI Number 59-2836230 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

CLEMENT, EUGENE F JR. 101 EAST 23RD STREET PANAMA CITY, FL 32405

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pons of registered agent	urpose of changing its registered office	or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title a	f applicable [NOTE Registered Agent sign	ature required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution,	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME SIREET ADDRESS CITY-SI-ZIP	CD QUALLS, ALBERT P JR 209 HARRIS AVENUE FT. WALTON BEACH, FL 32548			400000102011 04/02/04-80036-023 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLEMENT, EUGENE F JR 221 WOODLAWN DR. PANAMA CITY, FL 32407				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BARGER, ANGIE M 2730 MOSQUITO ROAD CHIPLEY, FL 32428		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					

12. Thereby 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 tike empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-St-ZiP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR FUGENCE F. Clement, Jr., President

3/31/04 Date

(850) 769-3207

Davlime Phone #