## 2008 FOR PROFIT CORPORATION

## Feb 06, 2008 08:00 AN **ANNUAL REPORT Secretary of State DOCUMENT # M51272** FIRST NORTHWEST FLORIDA HOLDING COMPANY Principal Place of Business Mailing Address P 0 BOX 59900 101 E 23 ST PANAMA CITY, FL 33405-4501 US PANAMA CITY, FL 32412-0900 US 02042008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 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. DO NOT WRITE 101 EAST 23RD STREET PANAMA CITY, FL 32405 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE QUALLS, ALBERT P JR NAME 209 HARRIS AVENUE STREET ADDRESS FT. WALTON BEACH, FL 32548 CITY-ST-ZIP TITLE CLEMENT, EUGENE F JR NAME U00000817383 02/14/08-80090-016 150.00 221 WOODLAWN DR. STREET ADDRESS PANAMA CITY, FL 32407 CITY-ST-ZIP TITLE NAME BARGER, ANGIE M 2730 MOSQUITO ROAD STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CHIPLEY, FL 32428 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Eugeneure Fnd Types on PRINTED NAME OF SIGNING OFFICER DROIRECTOR

2/4/08

(850) 769-3207

FILED