

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002216

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** PEOPLES FIRST COMMERCIAL CENTER PROPERTY OWNERS=ASSOCIATION, INC.

**Current Principal Place of Business:**

2920 KERRY FOREST PARKWAY  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

2510 14TH STREET  
ATTN TAX DEPT, 5TH FLOOR  
GULFPORT, MS 39501

**Current Mailing Address:**

1022 WEST 23RD STREET  
PANAMA CITY, FL 32405

**New Mailing Address:**

P.O. BOX 4019  
ATT TAX DEPARTMENT  
GULFPORT, MS 39502

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARR, JIMMY  
1022 WEST 23RD STREET  
PANAMA CITY, FL 32405 US

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

CT CORPORATION  
1200 SOUTH PINE ISLAND ROAD  
ATTN: B. BURKE  
PLANTATION, FL 33321 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: BARBARA A. BURKE

04/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: CHANEY, CARL J  
Address: 2510 14TH STREET  
City-St-Zip: GULFPORT, MS 39501

Title: DVP  
Name: HAIRSTON, JOHN M  
Address: 2510 14TH STREET  
City-St-Zip: GULFPORT, MS 39501

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CARL J. CHANEY

DP

04/28/2010

Electronic Signature of Signing Officer or Director

Date