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Jun 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N10448 (1)
1. Corporation Name
FEET FIRST FIRST TIME, INC.



Principal Place of Business % TERRY HENRY 8383 NORTH DAVIS HIGHWAY PENSACOLA FL 32514	Mailing Address % TERRY HENRY 8383 NORTH DAVIS HIGHWAY PENSACOLA FL 32514-6048
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25

3. Date Incorporated or Qualified 07/29/1985	3a. Date of Last Report 03/18/1996
4. FEI Number 59-2578370	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**HENRY, TERRY
8383 NORTH DAVIS HIGHWAY
PENSACOLA FL 32514**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL **85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE PD	<input checked="" type="checkbox"/> DELETE
NAME HAGEROTT, KAREN	
STREET ADDRESS 600 E. GOVERNMENT ST.	
CITY-ST-ZIP PENSACOLA FL	
TITLE PD	<input type="checkbox"/> DELETE
NAME DEATON, SUSANNE	
STREET ADDRESS 8383 N. DAVIS HWY	
CITY-ST-ZIP PENSACOLA FL	
TITLE TD	<input type="checkbox"/> DELETE
NAME FINLEY, JOE, CPA	
STREET ADDRESS 910 GARDENGATE CIRCLE	
CITY-ST-ZIP PENSACOLA FL	
TITLE MD	<input type="checkbox"/> DELETE
NAME HENRY, TERRY	
STREET ADDRESS 8383 N DAVIS HIGHWAY	
CITY-ST-ZIP PENSACOLA FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE VICE - PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME KURT HUNCA	
1.3 STREET ADDRESS 9383 N Davis Hwy	
1.4 CITY-ST-ZIP PENSACOLA FL 32514	
2.1 TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME SUSANNE DEATON	
2.3 STREET ADDRESS 8383 N DAVIS HWY	
2.4 CITY-ST-ZIP PENSACOLA, FL 32514	
3.1 TITLE TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME JOE FINLEY, CPA	
3.3 STREET ADDRESS 910 GARDENGATE CIRCLE	
3.4 CITY-ST-ZIP PENSACOLA, FL 32514	
4.1 TITLE MD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME TERRY HENRY	
4.3 STREET ADDRESS 8383 N DAVIS HWY	
4.4 CITY-ST-ZIP PENSACOLA, FL 32514	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E037 (9/96)