2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000002998

Entity Name: FIRST COAST FAMILY AND HOUSING FOUNDATION, INC.

FILED Mar 19, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

325 W ADAMS ST 2572 ATLANTIC BLVD

305 JACKSONVILLE, FL 32207 US

JACKSONVILLE, FL 32202 US

Current Mailing Address: New Mailing Address:

325 W ADAMS ST 2572 ATLANTIC BLVD.

305 JACKSONVILLE, FL 32207 US

FEI Number: 59-3206820 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAMM, MARY-PARKER
325 W ADAMS STREET STE 305
JACKSONVILLE, FL 32202

LAMM, MARY-PARKER
2572 ATLANTIC BLVD.
JACKSONVILLE, FL 32207

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: MARY-PARKER LAMM 03/19/2002

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OTTICERS AND DIRECTOR

Title:PD() DeleteTitle:PD(X) Change () AdditionName:BUXBAUM, GERALDName:DODSON, PATTYAddress:216 SEA ISLAND DRAddress:223 E. BAY STREET, SUITE 800

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: JACKSONVILLE, FL 32207

Title: VPBD () Delete Title: VPBD (X) Change () Addition

 Name:
 DODSON, PATRICIA
 Name:
 SMITH, BARNEY

 Address:
 223 E. BAY ST., SUITE 800
 Address:
 ONE SLEIMAN PLAZA, SUITE 270

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:
 JACKSONVILLE, FL 32216

Title: TBDT () Delete Title: () Change () Addition

 Name:
 JACKSON, DARRYL
 Name:

 Address:
 101 E. UNION ST.
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:

Title: EXD () Delete Title: EXD (X) Change () Addition

 Name:
 LAMM, MARY-PARKER
 Name:
 LAMM, MARY-PARKER

 Address:
 325 W. ADAMS ST., #305
 Address:
 2572 ATLANTIC BLVD.

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:
 JACKSONVILLE, FL 32207

Title: D () Delete Title: () Change () Addition

 Name:
 BRYANT, MICHAEL L
 Name:

 Address:
 1131 NORTH LAURA STREET
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: PATTY DODSON PD 03/19/2002