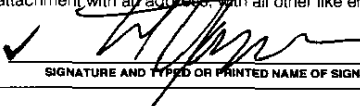


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90025 011 ****61.25

DOCUMENT # N98000004205 1. Entity Name HEALTH FIRST FOUNDATION, INC.					
Principal Place of Business 6450 US #1 ROCKLEDGE, FL 32955			Mailing Address 6450 US #1 ROCKLEDGE, FL 32955		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3528774	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent MATHIAS, DAVID E 6450 US HWY. #1 ROCKLEDGE, FL 32955				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MCCARTHY, EUGENE B 6450 US HWY. #1 ROCKLEDGE, FL 32955	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD KIRSCHENBAUM, MALCOLM R 6450 US HWY. #1 ROCKLEDGE, FL 32955	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BRANDON, WENDY S 6450 US. HWY. #1 ROCKLEDGE, FL 32955	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BJERNING, EUGENE K 6450 US HWY. #1 ROCKLEDGE, FL 32955	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIDDIX, PATRICK T. 6450 U.S. Hwy #1 ROCKLEDGE, FL 32955	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MENYHART, TIBOR 6450 U.S. HWY #1 ROCKLEDGE, FL 32955	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition			
12. I 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 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 617, 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 like empowered.					
SIGNATURE: 		Larry F. Garrison,		4/15/04	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Director		Date	
Daytime Phone #		321/434-4355			

Attachment

24049290

N98000084205

HEALTH FIRST FOUNDATION, INC. 2004 UNIFORM BUSINESS REPORT

10. Officers and Directors [continued]				11. Additions/Changes to Officers and Directors [continued]			
Title	D	[] Delete		Title	D	[] Change [x] Addition	
Name	DETTMER, DALE A.			Name	CODDINGTON, CARL D., JR.		
Street Address	6450 U.S. Hwy #1			Street Address	6450 U.S. Hwy #1		
City - ST - Zip	Rockledge, FL 32955			City - ST - Zip	Rockledge, FL 32955		
Title	D	[] Delete		Title	D	[] Change [x] Addition	
Name	FOSTER, EVELYN			Name	FARMER, JEANNE		
Street Address	6450 U.S. Hwy #1			Street Address	6450 U.S. Hwy #1		
City - ST - Zip	Rockledge, FL 32955			City - ST - Zip	Rockledge, FL 32955		
Title	D	[] Delete		Title	D	[] Change [x] Addition	
Name	GARRISON, LARRY F.			Name	GATTO, PAMELA A.		
Street Address	6450 U.S. Hwy #1			Street Address	6450 U.S. Hwy #1		
City - ST - Zip	Rockledge, FL 32955			City - ST - Zip	Rockledge, FL 32955		
Title	D	[] Delete		Title	D	[] Change [x] Addition	
Name	MEANS, MICHAEL D.			Name	MANDEL, ROBERT J.		
Street Address	6450 U.S. Hwy #1			Street Address	6450 U.S. Hwy #1		
City - ST - Zip	Rockledge, FL 32955			City - ST - Zip	Rockledge, FL 32955		
Title	D	[] Delete		Title	D	[] Change [x] Addition	
Name	MORIARTY, EDWARD L.			Name	PRUITT, PATRICIA		
Street Address	6450 U.S. Hwy #1			Street Address	6450 U.S. Hwy #1		
City - ST - Zip	Rockledge, FL 32955			City - ST - Zip	Rockledge, FL 32955		
Title	D	[] Delete		Title	D	[] Change [x] Addition	
Name	STORMS, ELTING L.			Name	THEISEN, RICHARD A.		
Street Address	6450 U.S. Hwy #1			Street Address	6450 U.S. Hwy #1		
City - ST - Zip	Rockledge, FL 32955			City - ST - Zip	Rockledge, FL 32955		
Title		[] Delete		Title		[] Change [] Addition	
Name				Name			
Street Address				Street Address			
City - ST - Zip				City - ST - Zip			
Title		[] Delete		Title		[] Change [] Addition	
Name				Name			
Street Address				Street Address			
City - ST - Zip				City - ST - Zip			
Title		[] Delete		Title		[] Change [] Addition	
Name				Name			
Street Address				Street Address			
City - ST - Zip				City - ST - Zip			
Title		[] Delete		Title		[] Change [] Addition	
Name				Name			
Street Address				Street Address			
City - ST - Zip				City - ST - Zip			