2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

☐ Change

☐ Addition

1. Entity Nam	MENT # N980000042 FIRST FOUNDATION, INC.	05			04-20-200	4 90025 011 ****6	1.25		
Principal Place 6450 US #1 ROCKLEDGE,		Mailing Address 6450 US #1 ROCKLEDGE, FL 32955	j						
2. Principal P	lace of Business	3. Mailing Address	·····						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02192004	02192004 Chg-NP CR2E037 (10/03)				
City & Stat	е	City & State		4. FEI Nun 50-35	nber 528774		oplied For		
Zip	Country	Zip	Country		ate of Status Desired	_ \$9.75 Add			
	6. Name and Address of Current Re	distand Agent		7 Name a	nd Address of New	Registered Agent	<u> </u>		
	o. Haine and Address of Current Ac	gistered Agent	Name	7. 144110 0	III Address of New	negistered Agent			
MATHIAS,				(50.5.1)	1				
6450 US F ROCKLED	IWY. #1 IGE, FL 32955		Street Ad	Idress (P.O. Box Nun	nber is Not Accepta	ble)			
					FL Zip Code				
	named entity submits this statement for the								
SIGNATURE	Signature, typed or printed name of registered agent and		: Registered Agent signatur	e required when reinstating)		DATE Make check payable t			
	Due by May 1, 2004	Trust Fund C		Added to Fe		orida Department of S			
10.	OFFICERS AND DIREC	CTORS	11.	ADDITIONS/0	CHANGES TO OFFIC	CERS AND DIRECTORS IN			
NAME STREET ADDRESS CITY-ST-ZIP	NAME MCCARTHY, EUGENE B 6450 US HWY. #1		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Add				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRANDON, WENDY S 6450 US. HWY. #1		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition		
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			Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIDDIX, PATRICK 6450 U.S. Hwy #1 ROCKLEDGE, FL 3		TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		

MENYHART, TIBOR 6450 U.S. HWY #1 ROCKLEDGE, FL 32955 12. I hereby certify that the information supplied with this filling 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 amounted 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 applications of the 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 application.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

Delete

TITLE

NAME

STREET ADDRESS

SIGNATURE: 🗹	M	<u> </u>	arry l	F.	Garrison,	4/15/04	321/434-4355	
	PED OR PRINT	ED NAME OF SIGNING OFFICE	A OR DIRECTOR	A	Director	Date	Daytime Phone #	
		_						_

Affachment 34049290 41 N93000004205

HEALTH FIRST FOUNDATION, INC. 2004 UNIFORM BUSINESS REPORT

	2001 01111 011111 01		
10. 0	fficers and Directors [continued]	11. Additions/Ch	anges 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	P 1 _	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	F T _	City – ST – Zip	
Title	[] Delete	Title	[] Change [] Addition
Name		Name	
Street Address		Street Address	
City – ST – Zip	177700	City – ST – Zip	