2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000040043

City-St-Zip:

PINELLAS PARK, FL 33782 US

FILED Feb 03, 2005 Secretary of State

Entity Nan	ne: FLORIDA	FIRST DEVELOPMENT CORI	⊃.		
Current Principal Place of Business:			New Principal I	New Principal Place of Business:	
4431 PARK BLVD PINELLAS PARK, FL 33781				4437 PARK BLVD PINELLAS PARK, FL 33781	
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
4431 PARK PINELLAS	KBLVD PARK, FL 33	781	4437 PARK BLV PINELLAS PARI		
FEI Number:	59-3716487	FEI Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Add	Name and Address of New Registered Agent:	
DAVIS, CLIFF J PRESIDE 4431 PARK BLVD. PINELLAS PARK, FL 33781 US			4437 PARK BLV	DAVIS, CLIFF J PRESIDE 4437 PARK BLVD. PINELLAS PARK, FL 33781 US	
The above in the State		submits this statement for the p	urpose of changing its reg	istered office or registered agent, or both,	
SIGNATUR	RE: CLIFF DA	VIS		02/03/2005	
	Electron	ic Signature of Registered Age	nt	Date	
Election Can	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DAVIS, CLIFF 7625 LEATHER	Delete FERN CT. K, FL 33782 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TAYLOR, MATT 918 BAYPOINT		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SEC () DAVIS, CLIFF 7625 LEATHER	Delete FERN CT.	Title: Name: Address:	() Change () Addition	

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

City-St-Zip:

SIGNATURE: CLIFF DAVIS **PRES** 02/03/2005