## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000107693

Entity Name: FIRST FLORIDA CONSULTING, INC.

**FILED** Feb 20, 2006 Secretary of State

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

830-13 A1A N, #442 6900-29 DANIELS PARKWAY PONTE VEDRA BEACH, FL 32082

#202

FORT MYERS, FL 33912

**Current Mailing Address: New Mailing Address:** 

6900-29 DANIELS PARKWAY 830-13 A1A N, #442 PONTE VEDRA BEACH, FL 32082

#202

FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 59-3755697 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:

NORMAN D. SANDERS NORMAN D. SANDERS 830-13 A1A NORTH #442 12441 VILLAGIO WAY

PONTE VEDRA BEACH, FL 32082 FORT MYERS, FL 33912 US US

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: 02/20/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

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

SANDERS, NORMAN D SANDERS, NORMAN D Name: Name: 830-13 A1A NORTH #442 6900-29 DANIELS PARKWAY #202 Address: Address:

FORT MYERS, FL 33912 City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip:

Title: Title: (X) Change ( ) Addition () Delete Name: Name: SANDERS, KAREN M

SANDERS, KAREN M

830-13 A1A NORTH #442 Address: 6900-29 DANIELS PARKWAY #202 Address:

PONTE VEDRA BEACH, FL 32082 FORT MYERS, FL 33912 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: NORMAN D. SANDERS DIR 02/20/2006