

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085672

FILED
Aug 17, 2004
Secretary of State

Entity Name: 1STPALM FINANCIAL, INC.

Current Principal Place of Business:

6675 CORPORATE CENTER PARKWAY
340
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

6675 CORPORATE CENTER PARKWAY
SUITE 340
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3620999 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTERSTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE STE 3000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MACKEY, ANN R
Address: 6675 CORPORATE CENTER PARKWAY, SUITE 340
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: D (X) Delete
Name: LAREN, PHILIP G
Address: 13827 EAST LONG'S LANDING
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: D () Delete
Name: DIAZ, MIGUEL J
Address: P. O., BOX 13461
City-St-Zip: GAINESVILLE, FL 32604 US

Title: D () Delete
Name: FELTENSTEIN, MARY B
Address: 11109 HILLSDALE DRIVE
City-St-Zip: KENSINGTON, MD 20895 US

Title: D () Delete
Name: YATES, JOHN R
Address: 86 VICTORIA ROAD
City-St-Zip: HALE, CHESHIRE, UK WA159AB UK

Title: D () Delete
Name: WHITE, EDWARD W JR
Address: 13851 LONGS LANDING RD. E.
City-St-Zip: JACKSONVILLE, FL 32225 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN R. MACKEY

D

08/17/2004

Electronic Signature of Signing Officer or Director

_____ Date