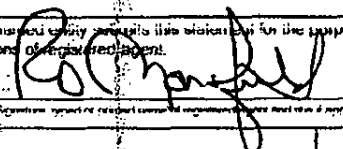
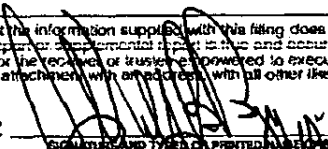
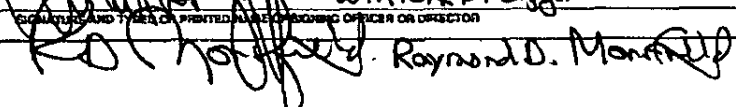


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 8:00 am
Secretary of State

04-30-2004 90347 036 ***150.00

DOCUMENT # P02000102167			
1. Entity Name FIRST FLORIDA INVESTORS, INC.			
Principal Place of Business 3001 SR 84 FT LAUDERDALE, FL 33312		Mailing Address 3001 SR 84 FT LAUDERDALE, FL 33312	
2. Principal Place of Business 2860 State Road 84 Suite, Apt. #, etc.		3. Mailing Address 2860 State Road 84 Suite, Apt. #, etc.	
City & State FT. Lauderdale, FL		City & State FT. Lauderdale, FL	
Zip 33312	Country USA	Zip 33312	Country USA
4. FEI Number APPLIED FOR		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BIGGER, WILLIAM B 3001 SR 84 FT LAUDERDALE, FL 33312		7. Name and Address of New Registered Agent Name: Raymond D. Mansfield Street Address (P.O. Box Number is Not Acceptable): 400 Santa Clara Trail City: Wellington FL Zip: 33414	
8. The above named entity certifies that it is in the process of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, the registered agent. SIGNATURE:  Raymond D. Mansfield DATE: 4/27/04			
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D ☐ Delete NAME: BIGGER, WILLIAM B STREET ADDRESS: 3001 SR 84 CITY-ST-ZIP: FT LAUDERDALE, FL 33312		TITLE: ☐ Change ☐ Addition NAME: 2860 State Road 84, Suite P2 STREET ADDRESS: 2860 State Road 84, Suite P2 CITY-ST-ZIP: 2860 State Road 84, Suite P2	
TITLE: D ☐ Delete NAME: MANSFIELD, RAYMOND STREET ADDRESS: 3001 SR 84 CITY-ST-ZIP: FT LAUDERDALE, FL 33312		TITLE: ☐ Change ☐ Addition NAME: 400 Santa Clara Trail STREET ADDRESS: 400 Santa Clara Trail CITY-ST-ZIP: Wellington, FL 33414	
TITLE: ☐ Delete NAME: STREET ADDRESS: CITY-ST-ZIP: 		TITLE: ☐ Change ☐ Addition NAME: STREET ADDRESS: CITY-ST-ZIP: 	
TITLE: ☐ Delete NAME: STREET ADDRESS: CITY-ST-ZIP: 		TITLE: ☐ Change ☐ Addition NAME: STREET ADDRESS: CITY-ST-ZIP: 	
TITLE: ☐ Delete NAME: STREET ADDRESS: CITY-ST-ZIP: 		TITLE: ☐ Change ☐ Addition NAME: STREET ADDRESS: CITY-ST-ZIP: 	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this 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 executor or trustee empowered to execute this report as required by Chapter 607, 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:  William B. Bigger		DATE: 4/27/04 954-791-9666	
SIGNATURE:  Raymond D. Mansfield		DATE: 4/27/04	



Department of the Treasury
Internal Revenue Service

Attachment

66423827
P02000102167

Date: 02/09/2004

Taxpayer Identification Number
59-3782390

To NAME RAYMOND MANSFIELD
ADDRESS FIRST FLORIDA INVESTORS INC
2860 STATE RD 84
PHONE NO FT LAUDERDALE, FL 33312
FAX NO 954-689-7801

FROM NAME Bonnie Allen
IRS Covington KY 41011
PHONE NO 866-860-4259
FAX NO 859-669-5655

We received your request today asking us to verify the employer identification number (EIN) and name. The employer identification number is listed above. Please keep this number in your permanent records. Your client should enter their name and their EIN, exactly as shown above, on all business federal tax forms that require its use, and on any related correspondence or documents.

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