

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000112314

Entity Name: FIRST HOME ASSOCIATES, INC.

FILED  
Feb 16, 2008  
Secretary of State

## Current Principal Place of Business:

2911 BENTWOOD LN  
FT WALTON BCH, FL 325476855

## New Principal Place of Business:

14498 SW 68TH TERRACE  
OCALA, FL 34473

## Current Mailing Address:

2911 BENTWOOD LN  
FT WALTON BCH, FL 325476855

## New Mailing Address:

14498 SW 68TH TERRACE  
OCALA, FL 34473

FEI Number: 71-0908354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRIES, ROBERT G  
2911 BENTWOOD LN  
FT WALTON BCH, FL 325476855 US

## Name and Address of New Registered Agent:

FRIES, ROBERT G  
14498 SW 68TH TERRACE  
OCALA, FL 34473 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:

02/16/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DVTS ( ) Delete  
Name: FRIES, ROBERT G  
Address: 2911 BENTWOOD LANE  
City-St-Zip: FORT WALTON BEACH, FL 325476855

Title: CP ( ) Delete  
Name: FRIES, MARGARET S  
Address: 2911 BENTWOOD LANE  
City-St-Zip: FORT WALTON BEACH, FL 325476855

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVTS (X) Change ( ) Addition  
Name: FRIES, ROBERT G  
Address: 14498 SW 68TH TERRACE  
City-St-Zip: OCALA, FL 34473

Title: CP (X) Change ( ) Addition  
Name: FRIES, MARGARET S  
Address: 14498 SW 68TH TERRACE  
City-St-Zip: OCALA, FL 34473

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT G FRIES

S

02/16/2008

Electronic Signature of Signing Officer or Director

Date