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2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2004 8:00 am Secretary of State 05-03-2004 91016 002 ***150.00

DOCUMENT # P03000 1. Entity Name FIRST PLACE MANAGEMENT 8					
Principal Place of Business	Mailing Address				
11648 FT CAROLINE LAKES DRIVE	11648 FT CAROLINE LAKES DRIVE				

Principal Place of Business 11648 FT. CAROLINE LAKES DRIVE JACKSONVILLE, FL 32225		Mailing Address 11648 FT, CAROLINE LAKES DRIVE JACKSONVILLE, FL 32225				94081449				
2. Principal Place of Business 3. Mailing			3. Mailing Address	ailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04262004	Chg-P	CR2E0	34 (10/03)			
City & State		City & State		4. FEI Numbe	5.3885'9	/		plied For		
Zip		Country	Zip	Count	try		of Status Desired		8.75 Add	
	6. Name	and Address of Current	Registered Agent			7. Name and	Address of New Re	gistered A	gent	
MULDROW, MICHAEL 11648 FT. CAROLINE LAKES DRIVE JACKSONVILLE, FL 32225			Name Street Address (P.O. Box Number is Not Acceptable)							
					City			FL	Zip Code	9
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE.	Signature, typed	or printed name of registered agent	and title if applicable. (N	OTE: Registere	d Agent signature	required when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Fin			ncing	\$5.00 May Be Added to Fees	·	- Augusta - Augu				
10.		OFFICERS AND	NIDECTORS	11.		ADDITIONS	CHANGES TO OFFI	CEDC AND	DIRECTOR	0.151.4.4
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I hereby certify that the information supplied with this filing does not qualify 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 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 trusted 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.