

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046965

FILED
Apr 28, 2006
Secretary of State

Entity Name: PEOPLES FIRST FINANCIAL, INC.

Current Principal Place of Business:

1022 W 23RD ST
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

1022 W 23RD ST
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 20-1002106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, RAYMOND
1022 W 23RD ST
PANAMA CITY, FL 32405 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: BARR, JIMMY
Address: 1022 W 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: CHAPMAN, KRISTIAN
Address: 1022 W 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: CHAPMAN, JOE
Address: 1022 W 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: LEWIS, JOHN
Address: 1022 W 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: POWELL, RAYMOND
Address: 1022 W 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D,P (X) Change () Addition
Name: CHAPMAN, KRISTIAN
Address: 1022 W 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

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

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

Title: D,VP (X) Change () Addition
Name: POWELL, RAYMOND
Address: 1022 W 23RD ST
City-St-Zip: PANAMA CITY, FL 32405

Title: ST () Change (X) Addition
Name: STEWART, DIANE
Address: 1022 WEST 23RD STREET
City-St-Zip: PANAMA CITY, FL 32405

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: JIMMY BARR

D

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date