

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000114134

FILED
May 17, 2007
Secretary of State

Entity Name: PEOPLES 1ST CHOICE FINANCE INC

Current Principal Place of Business:

2120 US HWY 1 S
SUITE 110
ST AUGUSTINE, FL 32086 US

New Principal Place of Business:

Current Mailing Address:

2120 US HWY 1 S
SUITE 110
ST AUGUSTINE, FL 32086 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPRINGHORN, CHRISTOPHER G
2120 US HWY 1 S
SUITE 111
ST AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

CHRISTOPHER SPRINGHORN CPA PA
2120 US HWY 1 S
SUITE 111
ST AUGUSTINE, FL 32086 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: CHRISTOPHER SPRINGHORN CPA PA
Electronic Signature of Registered Agent

05/17/2007
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SPRINGHORN, CHRISTOPHER G
Address: 2120 US HWY 1 S., STE 111
City-St-Zip: ST AUGUSTINE, FL 32086 US

Title: D (X) Delete
Name: TESDORPF, JOHN
Address: 515 CARCABA RD
City-St-Zip: ST AUGUSTINE, FL 32084 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TESDORPF, JOHN
Address: 515 CARCABA RD
City-St-Zip: ST AUGUSTINE, FL 32084 US

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

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: JOHN TESDORPF
Electronic Signature of Signing Officer or Director

P
05/17/2007
Date