

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076200

Entity Name: CITI FIRST LENDING INC

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

11200 ST JOHNS INDUSTRIAL PKWY N  
SUITE ONE  
JACKSONVILLE, FL 32246

## New Principal Place of Business:

## Current Mailing Address:

11200 ST JOHNS INDUSTRIAL PKWY N  
SUITE ONE  
JACKSONVILLE, FL 32246

## 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:

MURPHY, ERIC  
7990 BAYMEADOWS RD  
#430  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

THE ST JOHNS COMPANIES, INC  
10200 ST JOHNS INDUSTRIAL PARKWAY  
#100  
JACKSONVILLE, FL 32246 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: H W COFFIELD

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MURPHY, ERIC  
Address: 11200 ST JOHNS INDUSTRIAL PKWY SUITE ONE  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP ( ) Delete  
Name: COFFIELD, HAROLD  
Address: 11200 ST JOHNS INDUSTRIAL PKWY SUITE ONE  
City-St-Zip: JACKSONVILLE, FL 32246

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: COFFIELD, HAROLD  
Address: 11200 ST JOHNS INDUSTRIAL PKWY SUITE ONE  
City-St-Zip: JACKSONVILLE, FL 32246

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: H W COFFIELD

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date