
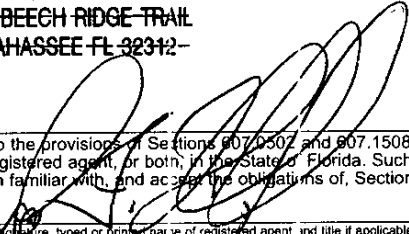


FILE NOW: FILING FEE AFTER MAY 1ST IS: \$550.00

FILED
Apr 28, 1999 8:00 am
Secretary of State

04-28-1999 90066 022 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000006983			
1. Corporation Name CAPITAL-FIRST HOLDINGS, INC.- REGIONAL DEVELOPERS, INC.			
Principal Place of Business 7118 BEECH RIDGE TRAIL TALLAHASSEE FL 32312		Mailing Address 7118 BEECH RIDGE TRAIL TALLAHASSEE FL 32312	
2. Principal Place of Business 21 2930 Wellington Circle South Suite, Apt. #, etc. 22 Suite 101 City & State 23 Tallahassee, FL Zip Country 24 32308 25 USA		2a. Mailing Address 26 2930 Wellington Cir. South Suite, Apt. #, etc. 27 Suite 101 City & State 28 Tallahassee, FL Zip Country 29 32308 30 USA	
3. Date Incorporated or Qualified 01/28/1994			
4. FEI Number 59-3285529			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent CONNER, MARK A- 7118 BEECH RIDGE TRAIL TALLAHASSEE FL 32312		10. Name and Address of New Registered Agent 81 Name James F. Heidenreich 82 Street Address (P.O. Box Number is Not Acceptable) 2930 Wellington Circle South 83 Suite 101 84 City Tallahassee, FL 85 Zip Code 32308	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE:  DATE: 4/26/99			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD <input checked="" type="checkbox"/> DELETE		1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME CONNER, MARK A-		1.2 NAME	
STREET ADDRESS 7118 BEECH RIDGE TRAIL -		1.3 STREET ADDRESS	
CITY-ST-ZIP TALLAHASSEE FL 32312		1.4 CITY-ST-ZIP	
TITLE D <input checked="" type="checkbox"/> DELETE		2.1 TITLE Vice-President - Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME PREISS, JAMES A - - -		2.2 NAME Robert E. Maloney, Jr.	
STREET ADDRESS 7118 BEECH RIDGE TRAIL - - -		2.3 STREET ADDRESS 2930 Wellington Circle South, Ste 101	
CITY-ST-ZIP TALLAHASSEE FL - - -		2.4 CITY-ST-ZIP Tallahassee, FL 32308	
TITLE SD <input checked="" type="checkbox"/> DELETE		3.1 TITLE Secretary - Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME DECHMAN, ANNE E - - -		3.2 NAME Judy C. Williams	
STREET ADDRESS 7118 BEECH RIDGE TRAIL - - -		3.3 STREET ADDRESS 2930 Wellington Circle South, Ste 101	
CITY-ST-ZIP TALLAHASSEE FL 32312 - - -		3.4 CITY-ST-ZIP Tallahassee, FL 32308	
TITLE V- <input type="checkbox"/> DELETE		4.1 TITLE President- Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME HEIDENREICH, JAMES F		4.2 NAME James F. Heidenreich	
STREET ADDRESS 7118 BEECH RIDGE TRAIL		4.3 STREET ADDRESS 2930 Wellington Circle South, Ste 101	
CITY-ST-ZIP TALLAHASSEE FL 32312		4.4 CITY-ST-ZIP Tallahassee, FL 32308	
TITLE <input type="checkbox"/> DELETE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE <input type="checkbox"/> DELETE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **James F. Heidenreich, President** **4/26/99**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)