

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 28, 2009  
Secretary of State**

DOCUMENT# P94000070754

Entity Name: FLORIDA FIRST HOLDINGS, INC.

**Current Principal Place of Business:**

5745 SW 72 STREET  
MIAMI, FL 33143 US

**New Principal Place of Business:**

**Current Mailing Address:**

5745 SW 72 STREET  
MIAMI, FL 33143 US

**New Mailing Address:**

FEI Number: 65-0567815      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HARPER, JAMES W  
5745 SW 72 STREET  
MIAMI, FL 33143 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HARPER, CAROL E  
Address: 5745 SW 72 STREET  
City-St-Zip: MIAMI, FL 33143

Title: CD ( ) Delete  
Name: HARPER, ALLEN C  
Address: 5745 SW 72 STREET  
City-St-Zip: MIAMI, FL 33143

Title: DST ( ) Delete  
Name: HARPER, JAMES W  
Address: 5745 SW 72 STREET  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: HARPER, SHAUNA E  
Address: 5745 SW 72 STREET  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: HARPER, MATTHEW B  
Address: 5745 SW 72 STREET  
City-St-Zip: MIAMI, FL 33143

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: D (X) Change ( ) Addition  
Name: HARPER, MATTHEW B  
Address: 5745 SW 72 STREET  
City-St-Zip: MIAMI, FL 33143

Title: D (X) Change ( ) Addition  
Name: ETHAN, HARPER A  
Address: 5745 SW 72 STREET  
City-St-Zip: MIAMI, FL 33143

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: JAMES W HARPER

Electronic Signature of Signing Officer or Director

DST

07/28/2009

Date