## FILED Mar 03, 2003 8:00 am Secretary of State

	JNIFORM BUSINE	SS REPORT	(UBR)		03-03-2003 S	1 <b>ry                                    </b>		
	JMENT # P94000080	516	152		02 02 2002			
1. Entity Na FIRST C	OAST DEVELOPMENT GRO	UP, INC.						
Principal Pla	ace of Business	Mailing Address	4.400	No. 1800	•			
3202 SAWGRASS VILLAGE CIR. 3202 SAWGRASS VILLA			E CIR.					
PONTE VED	RA BEACH, FL 32082 US	PONTE VEDRA BEACH, F	L 32082 US	ŀ				
2 Principal	Place of Business	2 Mailing Address	· · · · · · · · · · · · · · · · · · ·			i salat izili aatal ei		
4745 St	utton Park Court	3. Mailing Address 4745 Sutton Park Court						
Suite Apt #.etc. Building 500, Suite 501		Suite, Apt. #, etc. Building 500, Suite 501		01	CHECK HERE IF MAKING CHANGES			
City & Sta Jackson	oville, FL	City & State  Jacksonville,	, FL	4	4. FEI Number <b>59-3276752</b>	<u> </u>	Applied For Not Applicable	
Zip 32224	Country U.S.A.	32224	Country U.S.A.			\$8.75 AC	ditional	
	6Name and Address of Current I		<u> </u>	+ - e 10 - e = <b>-7</b>	7. Name and Address of New Regis	Fee Requir	'ed	
BARTLET		,	Name				<del>,_</del>	
50 HIGHW	「& HEEKIN, P.A. AY A1A., SUITE 103 DRA BEACH, FL 33082	Street Ac		Address (P.C	dress (P.O. Box Number Is Not Acceptable)			
TORTE VE	DRA BEACH, PL 33082							
<del>-</del>	190		City		,	FL Zip Cod		
8. The above the obliga	e named entity submits this statement for tions of registered agent.	the purpose of changing its	registered office of	or registered	agent, or both, in the State of Florida	. I am familiar with	, and accept	
SIGNATURE								
	Signature, typed or primed name of registered agent a	NOTION APPLICABLE. (NOTI	E: Repsiered Apentsigna	ture required whe	n einsteinu)	CATE		
r: Afte	FLE NOWH: FEE IS \$150:00 r May 1, 2003 Fee will be \$550:00 k Payable to Florida Department o	State			Election Campaign Financi     Trust Fund Contribution.		00 May Be of to Fees	
10.	OFFICERS AND [	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICER	IS AND DIRECTOR	RS IN 11	
TITLE NAME	STD WALCH, PETER A	5x Oelete	TITLE	ļ		☐ Change	Addition	
STREET ADDRESS	3202 SAWGRASS VILLAGE CIR.		namé Street address					
CITY-ST-ZP	PONTE VEDRA BEACH, FL 3208	2	CITY-ST-ZIP					
TITLE NAMÉ	VP/D	Delete	TALE			X Change	☐ Addition	
	DAUSEND, THOMAS 3202 SAWGRASS VILLAGE CIR.		NAME STREET ADDRESS	4745	Sutton Park Court			
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 3208	2	CRY-ST-ZIP	Bldg. Jacks	onville, FL 32224			
TITLE .	P/D	☐ Delete	TITLE		<u> </u>		Addition	
NAME STREET ADDRESS	LENDRY, BRYAN J. 3202 SAWGRASS VILLAGE CIR		NAME	4745	Sutton Park Court	-	_	
CITY-ST-ZP	PONTE VEDRA BEACH, FL 3208		, STREE1 ADDRESS City-St-Zip	Brad•	500, Ste. 501	<del>⇔</del>		
TITLE		☐ Delete	TALE	Jacks	onville, FL 32224	Change	Addition	
NAME			NAME	1		[_] Claride	C Managaii	
STREET ADDRESS CITY-ST-ZP			STREET ADDRESS		,			
TITLE			CITY-ST-21P					
NAME		L. Delete	TITLE			☐ Change	Addition	
STREET ADDRESS City-St-Zip			STREET ADDRESS CITY-ST-ZIP					
TITLE		☐ Delete	1ffLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME			<i>→</i> · <b>√</b>	_	
CITY-ST-2IP			STREET ADDRESS City - ST-21P				1	
12. I hereby o	ertify that the information supplied with the	nis filing does not qualify for	the avamention stat	ed in Section	119.07(3)(i), Florida Statutes. I furth	er certify that the in	nformation	
of the con	on this report or supplemental report is to poration or the receiver or trustee empow or on an attachment with an address, with	ered to ever its this report of						