2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000016501

Entity Name: FIRST COAST PREMIER GROUP, INC.

FILED Jun 16, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6639 SOUTHPOINT PKWY STE 107

JACKSONVILLE, FL 32216 US

Current Mailing Address: New Mailing Address:

6639 SOUTHPOINT PKWY STE 107

JACKSONVILLE, FL 32216 US

FEI Number: 59-3301472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DOYLE, WILLIAM E SCHOEPPEL, KEVIN A 2002 SOUTHSIDE BLVD 8777 SAN JOSE BLVD.

STE 201 BLDG. A

JACKSONVILLE, FL 32216 US JACKSONVILLE, FL 32217 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: KEVIN A. SCHOEPPEL 06/16/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COB () Delete Title: COB (X) Change () Addition

Name: HEATH, ROBERT K
Address: 12627 MEADOWSWEET LANE
Name: HEATH, ROBERT K
Address: 6556 PITTS ROAD

City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32219 US

Title: PCEO () Delete Title: PCEO (X) Change () Addition
Name: MYERS. WILLIAM P Name: MYERS. WILLIAM P

Address: 812 QUEENS HARBOUR BLVD. Address: 645 TREEHOUSE CIRCLE
City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: ST. AUGUSTINE, FL 32095 US

Title: EVP () Delete Title: EVP (X) Change () Addition

 Name:
 POOLE, JAMES G
 Name:
 POOLE, JAMES G

 Address:
 1212 TRAILWOOD DR
 Address:
 1212 TRAILWOOD DR

 City-St-Zip:
 NEPTUNE BCH, FL
 City-St-Zip:
 NEPTUNE BCH, FL
 32266 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM P. MYERS PCEO 06/16/2004