


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

FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000062265 (0)**  
1. Corporation Name  
**COMMUNITY FIRST, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>2305 HWY. 77 PANAMA CITY FL 32405</b>	Mailing Address <b>2305 HWY. 77 PANAMA CITY FL 32405</b>
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3. Date Incorporated or Qualified  
**08/11/1995**

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29
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4. FEI Number  
**59-3355327**  
Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent <b>BARR, JIMMY 2305 HWY. 77 PANAMA CITY FL 32405</b>	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<b>DVP</b> <input type="checkbox"/> DELETE
NAME	<b>BARR, JIMMY</b>
STREET ADDRESS	<b>2305 HWY. 77</b>
CITY-ST-ZIP	<b>PANAMA CITY FL</b>
TITLE	<b>DVP</b> <input checked="" type="checkbox"/> DELETE
NAME	<b>BOWERS, KEITH</b>
STREET ADDRESS	<b>2305 HWY. 77</b>
CITY-ST-ZIP	<b>PANAMA CITY FL</b>
TITLE	<b>VP</b> <input type="checkbox"/> DELETE
NAME	<b>CHAPMAN, KRISTIAN</b>
STREET ADDRESS	<b>2401 STANFORD RD #1413</b>
CITY-ST-ZIP	<b>PANAMA CITY FL</b>
TITLE	<b>DVP</b> <input type="checkbox"/> DELETE
NAME	<b>DAKE, JIM</b>
STREET ADDRESS	<b>2305 HWY. 77</b>
CITY-ST-ZIP	<b>PANAMA CITY FL</b>
TITLE	<b>DP</b> <input type="checkbox"/> DELETE
NAME	<b>POWELL, RAYMOND</b>
STREET ADDRESS	<b>2305 HWY. 77</b>
CITY-ST-ZIP	<b>PANAMA CITY FL</b>
TITLE	<b>ST</b> <input type="checkbox"/> DELETE
NAME	<b>STEWART DIANE</b>
STREET ADDRESS	<b>218 S CLAIRE DRIVE</b>
CITY-ST-ZIP	<b>PANAMA CITY FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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. I am an attachment with an address.

SIGNATURE:

*[Signature]*

4/30/98 (850) 769-5261

CR2E034 (1097)