
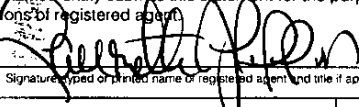
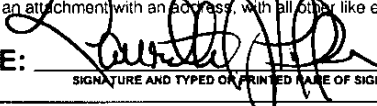


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90198 006 ***150.00

DOCUMENT # P99000100851 1. Entity Name PEOPLES FIRST INSURANCE, INC.					
Principal Place of Business 1022 W 23RD STREET PANAMA CITY, FL 32405			Mailing Address 1022 W 23RD STREET PANAMA CITY, FL 32405		
2. Principal Place of Business 1002 W. 23RD STREET Suite, Apt. #, etc. SUITE 400			3. Mailing Address 1002 W. 23RD STREET Suite, Apt. #, etc. SUITE 400		
City & State PANAMA CITY, FL			City & State PANAMA CITY, FL		
Zip 32405		Country USA		4. FEI Number 59-3614750	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BARR, JIMMY 1022 WEST 23RD STREET PANAMA CITY, FL 32405			7. Name and Address of New Registered Agent Name PIPPIN, LAURETTA J. Street Address (P.O. Box Number is Not Acceptable) 1002 W. 23RD STREET, SUITE 400 City PANAMA CITY FL Zip Code 32405		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Lauretta J. Pippin 4/21/06 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN, JOE 1022 W 23RD STREET PANAMA CITY, FL 32405	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN, JOSEPH F., III 1002 W. 23RD STREET, SUITE 400 PANAMA CITY, FL 32405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CHAPMAN, KRISTIAN 1022 W 23RD STREET PANAMA CITY, FL 32405	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POWELL, RAYMOND 1022 W 23RD STREET PANAMA CITY, FL 32405	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MIDDLEMAS, JOHN R 1022 W 23RD STREET PANAMA CITY, FL 32405	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST STEWART, DIANE 218 SOUTH CLAIRE DRIVE PANAMA CITY, FL 32401	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T PIPPIN, LAURETTA J. 1002 W. 23RD STREET, SUITE 400 PANAMA CITY, FL 32405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARR, JIMMY 1022 W 23RD STREET PANAMA CITY, FL 32405	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D BARR, JIMMY 1002 W. 23RD STREET, SUITE 400 PANAMA CITY, FL 32405
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Lauretta J. Pippin, Sec. 4/21/06 (850) 769-8981 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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01112006 Chg-P CR2E034 (11/05)