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Feb 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K15955 (3)

1. Corporation Name
FIRSTBANCORP INC.

Principal Place of Business	Mailing Address
3838 TAMIAMI TRAIL NORTH ~~12640 OVERSEAS HIGHWAY~~ NAPLES FL 34103 US	3838 TAMIAMI TRAIL NORTH ~~12640 OVERSEAS HIGHWAY~~ NAPLES FL 34103 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/24/1988

2. Principal Place of Business	2a. Mailing Address
21 3838 TAMIAMI TRAIL NORTH	26 3838 TAMIAMI TRAIL NORTH
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 NAPLES FL	City & State 28 NAPLES FL
Zip 24 34103 Country 25 U.S.	Zip 29 34103 Country 30 U.S.

4. FEI Number: 65-0030114 ☐ 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	10. Name and Address of New Registered Agent
JERRY J WILLIAMS 3838 TAMIAMI TRAIL, NORTH NAPLES FL ~~33940~~	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 34103

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ALAN PRATT		1.2 NAME		
STREET ADDRESS	4740 GULF SHORE BLVD, N		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	EARL HOLLAND		2.2 NAME		
STREET ADDRESS	15270 KILBIRNIE DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	JAMES AULTMAN		3.2 NAME		
STREET ADDRESS	5701 OVERSEAS HIGHWAY		3.3 STREET ADDRESS		
CITY-ST-ZIP	MARATHAN FL		3.4 CITY-ST-ZIP		
TITLE	DCP	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WILLIAMS, JERRY J.		4.2 NAME		
STREET ADDRESS	3838 TAMIAMI TRAIL NORTH		4.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		4.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	WILLIAM E MEYERS		5.2 NAME		
STREET ADDRESS	5381 8TH AVENUE, SW		5.3 STREET ADDRESS	5381 SYCAMORE DRIVE	
CITY-ST-ZIP	NAPLES FL		5.4 CITY-ST-ZIP	NAPLES FL 34119	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	GOTZES, HUBERT		6.2 NAME		
STREET ADDRESS	821 11TH DTREET		6.3 STREET ADDRESS		
CITY-ST-ZIP	KEY COLONY BEACH FL		6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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, or on an attachment with an address.

[signature] 1/7/98 941-261-4262