2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000107008

Entity Name: FIRST PEOPLES BANK

FILED Apr 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1301 SE PORT ST. LUCIE BLVD PORT ST. LUCIE, FL 34952 **Current Mailing Address: New Mailing Address:** 1792 NE JENSEN BEACH BLVD. JENSEN BEACH, FL 34957 FEI Number: 65-0824842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SKILES, DAVID W PRESCEO 1301 SÉ PORT ST. LUCIE BLVD. PORT ST. LUCIE, FL 34952 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPCF () Delete () Change () Addition Name: SKILES, DAVID W Name: 1301 SE PORT ST LUCIE BLVD Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34952 City-St-Zip: D/VC Title: Title: () Delete () Change () Addition Name: ZINTER, PAUL A Name: 2882 SE FARLEY ROAD Address: Address: PORT ST LUCIE, FL 34952 City-St-Zip: City-St-Zip: Title: Title: CD () Delete () Change () Addition BERGER, GARY A Name: Name: 7655 CHARLESTON WAY Address: Address: PORT ST. LUCIE, FL 34986 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition CUOZZO, DONALD J Name: Name: Address: 289 SW HARBOR VIEW DRIVE Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: Title: DS Title: () Delete () Change () Addition DECKER, ANN L Name: Name: 355 NE ELM TER Address: Address: City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MIRET, PAUL J Name: 7950 POPPYHILLIS LANE Address: Address: City-St-Zip: City-St-Zip: PORT ST. LUCIE, FL 34986

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: NANCY E. AUMACK, SVP/CFO SVP 04/06/2009