

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000093745

**Entity Name:** RETAILFIRST MUTUAL HOLDINGS, INC.**Current Principal Place of Business:**117 N. MASSACHUSETTS AVENUE  
LAKELAND, FL 33801**Current Mailing Address:**P.O. BOX 988  
LAKELAND, FL 33802 US**FEI Number:** 27-4498658**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**F&L CORP.  
ONE INDEPENDENT DRIVE, SUITE 1300  
JACKSONVILLE, FL 32202 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	D
Name	NISSEN III, NIS H
Address	4406 SUGARTREEDRIVE
City-State-Zip:	LAKELAND FL 33813

Title	D
Name	HANSELMAN, JOHN D
Address	320 FALLS STREET UNIT 1011
City-State-Zip:	GREENVILLE SC 29601

Title	DIRECTOR
Name	PETCOFF, CORY T
Address	1661 WILLIAMSBURG SQUARE
City-State-Zip:	LAKELAND FL 33803

Title	D
Name	PETCOFF, THOMAS S
Address	P.O. BOX 2007
City-State-Zip:	LAKELAND FL 33806

Title	DIRECTOR
Name	HODGES, RICKY T
Address	205 E HOOKER STREET
City-State-Zip:	BARTOW FL 33830

Title	DIRECTOR
Name	CONWAY, DAVID JOHN
Address	785 WHISPER WOODS DRIVE
City-State-Zip:	LAKELAND FL 33813

*I hereby 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 all other like empowered.*

**SIGNATURE:** THOMAS S. PETCOFF**DIRECTOR****04/14/2023**

Electronic Signature of Signing Officer/Director Detail

Date