2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 003153

Entity Name: THE BANK OF BONIFAY

FILED Feb 19, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

300 N. WAUKESHA ST BONIFAY, FL 32425

Current Mailing Address: New Mailing Address:

PO BOX 65

BONIFAY, FL 324252244

FEI Number: 59-0153840 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MEDLEY, GUY F
300 N WAUKESHA ST
BONIFAY, FL 32425 US

MEDLEY, MICHAEL A
300 N WAUKESHA ST
BONIFAY, FL 32425 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: MICHAEL A MEDLEY 02/19/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEC

Name: MEDLEY, MICHAEL A Address: 300 N. WAUKESHA ST City-St-Zip: BONIFAY, FL 32425

Title: [

Name: BEAN, MICHAEL
Address: 300 N. WAUKESHA ST
City-St-Zip: BONIFAY, FL 32425

Title: D

Name: ADAMS, JAMES F Address: 300 N. WAUKESHA ST City-St-Zip: BONIFAY, FL 32425

Title: [

Name: PARRISH, WYATT Address: 300 N WAKESHA ST City-St-Zip: BONIFAY, FL 32425

Title:

Name: BLACK, ROBERT E Address: 300 N WAUKESHA ST. City-St-Zip: BONIFAY, FL 32425

Title:

Name: MCCORMICK, MICHAEL S Address: 300 N WAUKESHA ST. City-St-Zip: BONIFAY, FL 32425

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: KATHY LEIBOLD CFO 02/19/2010