

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 003287

1. Entity Name
COASTAL COMMUNITY BANK



Principal Place of Business
22 AVENUE E
APALACHICOLA, FL 32320

Mailing Address
PO BOX 370
APALACHICOLA, FL 32329 US

2. Principal Place of Business
12141 Panama City Beach Pkwy

3. Mailing Address
12141 Panama City Bch Pkwy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02232005 Chg-P CR2E034 (10/03)

City & State
Panama City Beach FL

City & State
Panama City Beach FL

Zip
32407

Country
US

Zip
32407

Country
U.S.

4. FEI Number
59-0145250

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DUBOSE, TERRY
4321 JAN COOLEY DRIVE
PANAMA CITY, FL 32408

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

600054016376
05/06/05--01069--008 **61.25

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME MILLENDER, FARRIS V
STREET ADDRESS HWY. 67 NORTH
CITY-ST-ZIP CARRABELLE, FL

TITLE CD ☐ Delete
NAME DUBOSE, TERRY
STREET ADDRESS 4321 JAN COOLEY DRIVE
CITY-ST-ZIP PANAMA CITY BEACH, FL 32408

TITLE D ☐ Delete
NAME HOLSOMBAKE, JAMES
STREET ADDRESS 604 WOOD TRAIL
CITY-ST-ZIP PANAMA CITY, FL 32405

TITLE D ☒ Delete
NAME GANDER, JAMES V JR
STREET ADDRESS 1493 BLUFF ROAD
CITY-ST-ZIP APALACHICOLA, FL 32320

TITLE D ☐ Delete
NAME SHULER, J. GORDON
STREET ADDRESS 100 21ST STREET
CITY-ST-ZIP APALACHICOLA, FL 32320

TITLE D ☐ Delete
NAME BLOODWORTH, LEON R
STREET ADDRESS 7TH STREET
CITY-ST-ZIP APALACHICOLA, FL 32320

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition
NAME Harry Arnold
STREET ADDRESS P O Box 9
CITY-ST-ZIP Apalachicola FL 32329

TITLE D ☐ Change ☒ Addition
NAME Dewey Blaylock
STREET ADDRESS 7750 Robinwood Dr. Port St Joe FL
CITY-ST-ZIP 32456

TITLE D ☐ Change ☐ Addition
NAME Anthony DuBose
STREET ADDRESS 101 Legend Lakes DR, Panama
CITY-ST-ZIP City Beach FL 32407

TITLE D/v ☐ Change ☒ Addition
NAME Marcus Edenfield
STREET ADDRESS 30 Myrtle Ave Apalachicola FL 32420
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Charles R. Kovaleski
STREET ADDRESS 3000 W 27th Ct, Panama City
CITY-ST-ZIP FL 32405

TITLE D ☐ Change ☒ Addition
NAME James Oenbrink
STREET ADDRESS 801 E 6th St #202, Panama City FL
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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: Lynda Saye LYNDA SAYE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/05 850-249-2265

Date

Daytime Phone #

AMENDED FILED

05 APR 15 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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Coastal Community Bank
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V/T          XAddition
Elwood "Woody" West
113 Legend Lakes
Panama City Beach FL 32407
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v                ✕Addition
Jim Norton
103 St Joseph Dr
Port St Joe FL  32456

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V ~~X~~Addition
Michael Byers
127 Marlin Circle
Panama City Beach FL 32408