003287

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
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PICK-UP	☐ WAIT	MAIL			
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.(D0	cument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				
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Office Use Only



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TIL TO

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COVER LETTER

TO:	Amendment Section Division of Corporatio	ns					
SUBJ	ECT:	Coastal Comm	nunity Bank Corporation				
DOC	UMENT NUMBER:		003287				
The er	nclosed Statement of Cha	nge of Registered Offic	ce/Agent and fee ar	e submitted for filing.			
Please	return all correspondenc	e concerning this matte	er to the following:				
	Terry DuBose Name of Contact Person						
Coastal Community Bank							
			ompany				
	, , , ,	12141 Panama C	ity Beach Parkv	vay			
		Add	aress				
Panama City Beach, FL 32407 City/State and Zip Code							
		Chyrsiale t	ina zip coac				
bstewart@ccbflorida.com							
E-mail address: (to be used for future annual report notification)							
For fu	orther information concer	ning this matter, please	call:				
	Terry Du		at (<u>850</u>	249-2265 & Daytime Telephone Number			
	Name of Contac	ct reison	Alea Code	& Daytime Telephone Number			
Enclo	sed is a \$35.00 check ma	de payable to the Depar	rtment of State.				
	Divisi P.O. I	dment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Cliftor	Address: Iment Section on of Corporations on Building Executive Center Circle			

Tallahassee, FL 32301

STATEMENT, OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.050 statement of change is submitted for a corporation organ in order to change its registered office or registe	ized under the laws of the State of	f Florida
1. The name of the corporation: Coastal Commur	nity Bank	
2. The principal office address: 12141 Panama City		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 07/07/1906	Document number:	003287
5. The name and street address of the current registered a Florida Department of State: (If resigned, enter resigned)		with the
Terry DuBose		
4321 Jan Cooley Drive		_ % 3
Panama City, FL 32408		_ 器 声 卫
6. The name and street address of the new registered age (if changed):	ent (if changed) and /or registered	office
Terry DuBose		TI ST
12141 Panama City Beach Par		
P.O. Box NO Panama City Beach, FL 32407	OT acceptable	
The street address of its registered office and the stree as changed will be identical.		of its registered agent,
Such change was authorized by resolution duly adopte authorized by the board, or the corporation has been n		
System of any inch or difference	Terry DuBo	nd title
I hereby accept the appointment as registered agent a I further agree to comply with the provisions of all sto of my duties, and I am familiar with and accept the object when the condition of the condition is being filed merely to reflect a change in the corporation has been notified in writing of this chang	ind agree to act in this capacity, itutes relative to the proper and bligation of my position as regist the registered office address, I have.	complete performance vered agent. Or, if this vereby confirm that the
N/A	7/3/09	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Tuped or Printed Name		
* * * FILING F	FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)