## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 011537** 

Entity Name: FIRST BANK

FILED Apr 21, 2006 Secretary of State

pal Place of Business:
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300 E. SUGARLAND HIGHWAY P.O. BOX 1237 CLEWISTON, FL 33440

Current Mailing Address: New Mailing Address:

300 E. SUGARLAND HIGHWAY P.O. BOX 1237 CLEWISTON, FL 33440

FEI Number: 59-0242465 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:

COUSE, MILLER 227 W CRESCENT DR CLEWISTON, FL 33440 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: MILLER COUSE 04/21/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition
Name: PERRY, THOMAS C JR
Address: P O BOX 145
City-St-Zip: CLEWISTON, FL 33440
City-St-Zip: City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 RIDGDILL, MORRIS,
 Name:
 RIDGDILL, MORRIS

 Address:
 209 CYPRESS AVENUE
 Address:
 209 CYPRESS AVENUE

 City-St-Zip:
 CLEWISTON, FL
 City-St-Zip:
 CLEWISTON, FL

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: COUSE, MILLER, Name: COUSE, MILLER

Address: 227 W. CRESCENT AVENUE Address: 227 W. CRESCENT AVENUE

City-St-Zip: CLEWISTON, FL City-St-Zip: CLEWISTON, FL

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 TERRILL, JAMES E.,
 Name:
 BEER, BRYAN

 Address:
 1045 PALMETTO AVENUE
 Address:
 1021 N RIVER RD

 City-St-Zip:
 CLEWISTON, FL
 City-St-Zip:
 LABELLE, FL
 33935

Title: VPST ( ) Delete Title: VPST (X) Change ( ) Addition

 Name:
 WOOD, RANDALL N

 Address:
 S R 720

 Address:
 282 CR 720

City-St-Zip: CLEWISTON, FL City-St-Zip: CLEWISTON, FL 33440

 Title:
 D
 ( ) Delete
 Title:
 ( ) Change ( ) Addition

 Name:
 EDWARDS, EARL E 111
 Name:

 Address:
 325 E DEL MONTE AVE
 Address:

 City-St-Zip:
 CLEWISTON, FL 33440
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RANDALL N WOOD VPST 04/21/2006