2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005
Secretary of State

DOCUMENT# 018366

Entity Name: THE WARRINGTON BANK

Current Principal Place of Business:

4093 BARRANCAS AVENUE
POST OFFICE BOX 4877
WARRINGTON, FL 32507

New Principal Place of Business:

Current Mailing Address:

4093 BARRANCAS AVENUE
POST OFFICE BOX 4877
WARRINGTON, FL 32507

New Mailing Address:

FEI Number: 59-0686240 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, RAYMOND H.
4093 BARRANCAS AVE.
PENSACOLA, FL 32507 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	HESS, MARILYN W	
Address:	4060 BARRANCAS AVE.	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	VP	( ) Delete
Name:	RUSSO, GAIL E	
Address:	403 GIBBS RD.	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	D	( ) Delete
Name:	RICHARDSON, ROBERT W	
Address:	141 BAYSHORE DR.	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	VD	( ) Delete
Name:	KILPATRICK, MARTHA S,	
Address:	1838 HOLLYHILL RD	
City-St-Zip:	PENSACOLA, FL 00000, 32526	
Title:	PD	( ) Delete
Name:	JONES, RAYMOND H	
Address:	7832 BAY MEADOWS DR	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	D	( ) Delete
Name:	PARKER, EDWARD J	
Address:	10 STAR LAKE DR	
City-St-Zip:	PENSACOLA, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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: MARTHA S. KILPATRICK SVP 01/26/2005

Electronic Signature of Signing Officer or Director — Date