2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 270902

Entity Name: BANK OF THE SOUTH

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
	FIELD DRIVE _A, FL 32506	US			
Current Mailing Address:			New Mailir	New Mailing Address:	
P.O.BOX 32 PENSACOI	229 _A, FL 32516	US			
FEI Number:	59-1050700	FEI Number Applied For ()	El Number Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
TYRRELL, ROSE MARIE 1077 GERHARDT DR PENSACOLA, FL 32503 US			4410 W FA	BRAMMER, JAMES 4410 W FAIRFIELD DR PENSACOLA, FL 32506 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: JAMES BRAMMER 01/13/2009					
Electronic Signature of Registered Agent				Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () D MAIR, DONNA 585 WINDROSE O PENSACOLA, FL	CIRCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () D ROSENBLOUM, A 417 CANTERBUR GULF BREEZE, F	ALAN Y LN	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () D WOODBURY, WI 1061 HARBOURV PENSACOLA, FL	LLIAM P IEW CIRCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	AC () D MACGREGOR, M 14710 GREGOR PENSACOLA, FL	ARY LANE	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition MACGREGOR, MARY 14710 GREGOR LANE PENSACOLA, FL 32507	
Title: Name: Address: City-St-Zip:	DEVP () D TYRRELL, ROSE 1077 GERHARDT PENSACOLA, FL	MARIE DR	Title: Name: Address: City-St-Zip:	D (X) Change () Addition TYRRELL, ROSE MARIE 1077 GERHARDT DR PENSACOLA, FL 32503	
Title: Name: Address: City-St-Zip:	VD () D WOODBURY, CH 4060 BARRANCA PENSACOLA, FL	ARLES P., III	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify 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: JAMES BRAMMER CFO 01/13/2009