

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 425690

FILED
Mar 06, 2007
Secretary of State

Entity Name: FIRST NAVY BANK

Current Principal Place of Business:

NAVAL AIR STATION
PENSACOLA, FL 32508

New Principal Place of Business:

Current Mailing Address:

NAVAL AIR STATION
180 TAYLOR RD
PENSACOLA, FL 325085308 US

New Mailing Address:

FEI Number: 59-1482537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEDY, TONIE
8242 LIFAIR DRIVE
PENSACOLA, FL 32506 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: PD () Delete
Name: DURR, JIM H
Address: NAVAL AIR STATION, 180 TAYLOR RD
City-St-Zip: PENSACOLA, FL 32508

Title: VSD () Delete
Name: KENNEDY, M TONIE
Address: NAVAL AIR STATION, 180 TAYLOR RD
City-St-Zip: PENSACOLA, FL 32508

Title: D () Delete
Name: MAIR, DONNA L
Address: NAVAL AIR STATION, 180 TAYLOR RD
City-St-Zip: PENSACOLA, FL 32508

Title: CDP () Delete
Name: WOODBURY, WILLIAM P
Address: NAVAL AIR STATION 180 TAYLOR RD
City-St-Zip: PENSACOLA, FL 32508

Title: D () Delete
Name: JONES, RAYMOND,
Address: NAVAL AIR STATION, 180 TAYLOR RD
City-St-Zip: PENSACOLA, FL 32508

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:

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: TONIE KENNEDY

VP

03/06/2007

Electronic Signature of Signing Officer or Director

_____ Date