## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 444135**

Entity Name: PEOPLES BANK OF GRACEVILLE

FILED Feb 23, 2010 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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5306 BROWN ST.

GRACEVILLE, FL 32440 US

Current Mailing Address: New Mailing Address:

PO BOX 596

GRACEVILLE, FL 32440 US

FEI Number: 59-1510993 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:

WATFORD, DAVID M 5306 BROWN STREET GRACEVILLE, FL 32440 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PCOO

Name: WATFORD, DAVID M Address: 5365 CHERRY ST

City-St-Zip: GRACEVILLE, FL 32440 US

Title: D S

Name: SHEFFIELD, JOSEPH Address: P.O. BOX 28329

City-St-Zip: PANAMA CITY, FL 32400 US

Title: DVC Name: MCR

Name: MCRAE, C. F Address: 1190 8TH AVENUE

City-St-Zip: GRACEVILLE, FL 32440 US

Title: CCEO

Name: GRAHAM, DONALD R Address: 5368 EZELL ST.

City-St-Zip: GRACEVILLE, FL 32440 US

Title: EVP

 Name:
 SMITH, CAROL C

 Address:
 1255 SANDERS ROAD

 City-St-Zip:
 GRACEVILLE, FL 32440 US

Title: SVP

Name: CRISP, BENJIE L Address: 1690 HWY 2

City-St-Zip: GRACEVILLE, FL 32440 US

I hereby 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 all other like empowered.

SIGNATURE: CAROL C SMITH EVP 02/23/2010