

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001779

Entity Name: CITIZENS FIRST BANCORP, INC.

FILED  
Apr 26, 2007  
Secretary of State

## Current Principal Place of Business:

525 WATER STREET  
PORT HURON, MI 48060

## New Principal Place of Business:

## Current Mailing Address:

525 WATER STREET  
PORT HURON, MI 48060

## New Mailing Address:

FEI Number: 38-3573582

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAHAM, KEVIN H  
101 EAST KENNEDY BOULEVARD  
SUITE 2800  
TAMPA, FL 33602 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: CP ( ) Delete  
Name: CAMPBELL, MARSHALL J  
Address: 525 WATER STREET  
City-St-Zip: PORT HURON, MI 48060

Title: VCST ( ) Delete  
Name: REGAN, TIMOTHY D  
Address: 525 WATER STREET  
City-St-Zip: PORT HURON, MI 48060

Title: D ( ) Delete  
Name: KELLERMAN, CHRISTOPHER  
Address: 2929 LAPEER ROAD  
City-St-Zip: PORT HURON, MI 48060

Title: D ( ) Delete  
Name: DEMASHKIEH, WALID M.D.  
Address: 1522 PINE GROVE AVENUE  
City-St-Zip: PORT HURON, MI 48060

Title: D ( ) Delete  
Name: COOLEY, RONALD  
Address: 2801 GRATIOT  
City-St-Zip: MARYSVILLE, MI 48040

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: WHIPPLE, JANICE U  
Address: 525 WATER STREET  
City-St-Zip: PORT HURON, MI 48060

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: TIMOTHY D. REGAN

VCST

04/26/2007

Electronic Signature of Signing Officer or Director

Date